

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
0001F	M											
0005F	M											
00100	N											
00102	N											
00103	N											
00104	N											
00120	N											
00124	N											
00126	N											
0012F	M											
00140	N											
00142	N											
00144	N											
00145	N											
00147	N											
00148	N											
0014F	M											
0015F	M											
00160	N											
00162	N											
00164	N											
0016T	T	0235										
00170	N											
00172	N											
00174	N											
00176	C											
0017T	T	0235										
00190	N											
00192	C											
0019T	A											
00210	N											
00212	N											
00214	C											
00215	C											
00216	N											
00218	N											
00220	N											
00222	N											
0026T	A											
0027T	T	0220										
0028T	N											
0029T	A											
00300	N											
0030T	A											
0031T	N											
00320	N											
00322	N											
00326	N											
0032T	N											
00350	N											
00352	N											
00400	N											
00402	N											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
00404	N										
00406	N										
00410	N										
00411T	A										
0042T	N										
0043T	A										
00450	N										
00452	C										
00454	N										
0046T	T	0021									
00470	N										
00472	N										
00474	C										
0047T	T	0021									
0048T	C										
0049T	C										
00500	N										
0050T	C										
0051T	C										
00520	N										
00522	N										
00524	C										
00528	N										
00529	N										
0052T	C										
00530	N										
00532	N										
00534	N										
00537	N										
00539	N										
0053T	C										
00540	C										
00541	N										
00542	C										
00546	C										
00548	N										
0054T	D										
00550	N										
0055T	D										
00560	C										
00561	C										
00562	C										
00563	N										
00566	N										
0056T	D										
00580	C										
0058T	X	0344									
0059T	X	0344									
00600	N										
00604	C										
0060T	B										
0061T	B										
00620	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
00622	C										
00625	N										
00626	N										
0062T	T	0050									
00630	N										
00632	C										
00634	N										
00635	N										
0063T	T	0050									
00640	N										
0064T	X	0367									
0065T	D										
0066T	E										
00670	C										
0067T	S	0332									
0068T	B										
0069T	N										
00700	N										
00702	N										
0070T	B										
0071T	S	0067									
0072T	S	0067									
00730	N										
0073T	S	0412									
00740	N										
0074T	D										
00750	N										
00752	N										
00754	N										
00756	N										
0075T	C										
0076T	C										
00770	N										
0077T	C										
0078T	C										
00790	N										
00792	C										
00794	C										
00796	C										
00797	N										
0079T	C										
00800	N										
00802	C										
0080T	C										
00810	N										
0081T	C										
00820	N										
00830	N										
00832	N										
00834	N										
00836	N										
00840	N										
00842	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
00844	C										
00846	C										
00848	C										
0084T	T	0164									
00851	N										
0085T	X	0340									
00860	N										
00862	N										
00864	C										
00865	C										
00866	C										
00868	C										
0086T	N										
00870	N										
00872	N										
00873	N										
0087T	X	0344									
00880	N										
00882	C										
0088T	T	0253									
0089T	S	0218									
00902	N										
00904	C										
00906	N										
00908	C										
0090T	C										
00910	N										
00912	N										
00914	N										
00916	N										
00918	N										
00920	N										
00921	N										
00922	N										
00924	N										
00926	N										
00928	N										
0092T	C										
00930	N										
00932	C										
00934	C										
00936	C										
00938	N										
0093T	C										
00940	N										
00942	N										
00944	C										
00948	N										
00950	N										
00952	N										
0095T	C										
0096T	C										
0098T	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
0099T	T	0233							
0100T	T	0672							
0101T	T	0050							
0102T	T	0050							
0103T	A								
0104T	A								
0105T	A								
0106T	X	0341							
0107T	X	0341							
0108T	X	0341							
0109T	X	0341							
0110T	X	0341							
01112	N								
0111T	A								
01120	N								
01130	N								
01140	C								
01150	C								
0115T	D								
01160	N								
0116T	D								
01170	N								
01173	N								
0117T	D								
01180	N								
01190	N								
01200	N								
01202	N								
01210	N								
01212	C								
01214	C								
01215	N								
01220	N								
01230	N								
01232	C								
01234	C								
0123T	T	0234							
0124T	T	0232							
01250	N								
01260	N								
0126T	Q	0340							
01270	N								
01272	C								
01274	C								
0130T	B								
01320	N								
01340	N								
0135T	D								
01360	N								
0137T	T	0184							
01380	N								
01382	N								
01390	N								

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
01392	N										
01400	N										
01402	C										
01404	C										
0140T	A										
0141T	E										
01420	N										
0142T	E										
01430	N										
01432	N										
0143T	E										
01440	N										
01442	C										
01444	C										
0144T	S	0282									
0145T	S	0383									
01462	N										
01464	N										
0146T	S	0383									
01470	N										
01472	N										
01474	N										
0147T	S	0383									
01480	N										
01482	N										
01484	N										
01486	C										
0148T	S	0383									
01490	N										
0149T	S	0383									
01500	N										
01502	C										
0150T	S	0383									
0151T	S	0282									
01520	N										
01522	N										
0153T	D										
0154T	D										
0155T	T	0130									
0156T	T	0130									
0157T	C										
0158T	C										
0159T	N										
0160T	S	0216									
01610	N										
0161T	S	0216									
01620	N										
01622	N										
0162T	S	0692									
01630	N										
01632	C										
01634	C										
01636	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
01638	C										
0163T	C										
0164T	C										
01650	N										
01652	C										
01654	C										
01656	C										
0165T	C										
0166T	C										
01670	N										
0167T	C										
01680	N										
01682	N										
0168T	T	0251									
0169T	C										
0170T	T	0150									
01710	N										
01712	N										
01714	N										
01716	N										
0171T	T	0050									
0172T	T	0050									
01730	N										
01732	N										
0173T	N										
01740	N										
01742	N										
01744	N										
0174T	N										
01756	C										
01758	N										
0175T	N										
01760	N										
0176T	T	0673									
01770	N										
01772	N										
0177T	T	0673									
01780	N										
01782	N										
0178T	B										
0179T	X	0100									
0180T	B										
01810	N										
0181T	S	0230									
01820	N										
01829	N										
0182T	S	1519									
01830	N										
01832	N										
0183T	T	0015									
01840	N										
01842	N										
01844	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
0184T	C										
01850	N										
01852	N										
0185T	N										
01860	N										
0186T	T	0236									
0187T	S	0230									
01905	D										
01916	N										
01920	N										
01922	N										
01924	N										
01925	N										
01926	N										
01930	N										
01931	N										
01932	N										
01933	N										
01935	N										
01936	N										
01951	N										
01952	N										
01953	N										
01958	N										
01960	N										
01961	N										
01962	N										
01963	N										
01965	N										
01966	N										
01967	N										
01968	N										
01969	N										
01990	C										
01991	N										
01992	N										
01996	N										
01999	N										
0500F	M										
0501F	M										
0502F	M										
0503F	M										
0505F	M										
0507F	M										
0509F	M										
0513F	M										
0514F	M										
0516F	M										
0517F	M										
0518F	M										
0519F	M										
0520F	M										
0521F	M										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
1000F	M										
10021	T	0002									
10022	T	0004									
1002F	M										
1003F	M										
10040	T	0013									
1004F	M										
1005F	M										
10060	T	0006									
10061	T	0006									
1006F	M										
1007F	M										
10080	T	0006									
10081	T	0007									
1008F	M										
10120	T	0006									
10121	T	0021									
10140	T	0007									
1015F	M										
10160	T	0006									
10180	T	0008									
1018F	M										
1019F	M										
1022F	M										
1026F	M										
1030F	M										
1034F	M										
1035F	M										
1036F	M										
1038F	M										
1039F	M										
1040F	M										
1050F	M										
1055F	M										
1060F	M										
1061F	M										
1065F	M										
1066F	M										
1070F	M										
1071F	M										
1080F	D										
1090F	M										
1091F	M										
11000	T	0013									
11001	T	0013									
11004	C										
11005	C										
11006	C										
11008	C										
1100F	M										
11010	T	0019									
11011	T	0019									
11012	T	0019									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
1101F	M										
11040	T	0015									
11041	T	0015									
11042	T	0016									
11043	T	0016									
11044	T	0682									
11055	T	0013									
11056	T	0013									
11057	T	0015									
11100	T	0013									
11101	T	0013									
1110F	M										
1111F	M										
1116F	M										
1118F	M										
1119F	M										
11200	T	0013									
11201	T	0015									
1121F	M										
1123F	M										
1124F	M										
1125F	M										
1126F	M										
1127F	M										
1128F	M										
11300	T	0013									
11301	T	0013									
11302	T	0013									
11303	T	0015									
11305	T	0013									
11306	T	0013									
11307	T	0013									
11308	T	0013									
11310	T	0013									
11311	T	0013									
11312	T	0013									
11313	T	0013									
11400	T	0019									
11401	T	0019									
11402	T	0019									
11403	T	0020									
11404	T	0021									
11406	T	0021									
11420	T	0020									
11421	T	0020									
11422	T	0020									
11423	T	0021									
11424	T	0021									
11426	T	0022									
11440	T	0019									
11441	T	0019									
11442	T	0020									
11443	T	0020									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
11444	T	0020									
11446	T	0022									
11450	T	0022									
11451	T	0022									
11462	T	0022									
11463	T	0022									
11470	T	0022									
11471	T	0022									
11600	T	0019									
11601	T	0019									
11602	T	0019									
11603	T	0020									
11604	T	0020									
11606	T	0021									
11620	T	0020									
11621	T	0019									
11622	T	0020									
11623	T	0020									
11624	T	0021									
11626	T	0022									
11640	T	0019									
11641	T	0019									
11642	T	0020									
11643	T	0020									
11644	T	0021									
11646	T	0022									
11719	T	0013									
11720	T	0013									
11721	T	0013									
11730	T	0013									
11732	T	0013									
11740	T	0012									
11750	T	0019									
11752	T	0022									
11755	T	0019									
11760	T	0134									
11762	T	0136									
11765	T	0015									
11770	T	0022									
11771	T	0022									
11772	T	0022									
11900	T	0013									
11901	T	0013									
11920	T	0134									
11921	T	0134									
11922	T	0134									
11950	T	0133									
11951	T	0133									
11952	T	0133									
11954	T	0133									
11960	T	0137									
11970	T	0051									
11971	T	0022									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
11975	E										
11976	T	0019									
11977	E										
11980	X	0340									
11981	X	0340									
11982	X	0340									
11983	X	0340									
12001	T	0133									
12002	T	0133									
12004	T	0133									
12005	T	0133									
12006	T	0133									
12007	T	0133									
12011	T	0133									
12013	T	0133									
12014	T	0133									
12015	T	0133									
12016	T	0133									
12017	T	0133									
12018	T	0133									
12020	T	0135									
12021	T	0135									
12031	T	0134									
12032	T	0134									
12034	T	0134									
12035	T	0134									
12036	T	0134									
12037	T	0134									
12041	T	0134									
12042	T	0134									
12044	T	0134									
12045	T	0134									
12046	T	0134									
12047	T	0134									
12051	T	0134									
12052	T	0134									
12053	T	0134									
12054	T	0134									
12055	T	0134									
12056	T	0134									
12057	T	0134									
13100	T	0135									
13101	T	0135									
13102	T	0135									
13120	T	0134									
13121	T	0135									
13122	T	0134									
13131	T	0135									
13132	T	0135									
13133	T	0135									
13150	T	0135									
13151	T	0135									
13152	T	0135									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
13153	T	0134									
13160	T	0137									
14000	T	0136									
14001	T	0136									
14020	T	0136									
14021	T	0136									
14040	T	0136									
14041	T	0136									
14060	T	0136									
14061	T	0136									
14300	T	0137									
14350	T	0137									
15002	T	0135									
15003	T	0135									
15004	T	0135									
15005	T	0135									
15040	T	0134									
15050	T	0135									
15100	T	0137									
15101	T	0137									
15110	T	0135									
15111	T	0135									
15115	T	0135									
15116	T	0135									
15120	T	0137									
15121	T	0137									
15130	T	0136									
15131	T	0136									
15135	T	0136									
15136	T	0136									
15150	T	0135									
15151	T	0135									
15152	T	0135									
15155	T	0135									
15156	T	0135									
15157	T	0135									
15170	T	0134									
15171	T	0134									
15175	T	0135									
15176	T	0135									
15200	T	0136									
15201	T	0136									
15220	T	0136									
15221	T	0135									
15240	T	0136									
15241	T	0135									
15260	T	0136									
15261	T	0136									
15300	T	0135									
15301	T	0135									
15320	T	0135									
15321	T	0135									
15330	T	0135									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
15331	T	0135									
15335	T	0135									
15336	T	0135									
15340	T	0134									
15341	T	0134									
15360	T	0134									
15361	T	0134									
15365	T	0134									
15366	T	0134									
15400	T	0135									
15401	T	0135									
15420	T	0135									
15421	T	0135									
15430	T	0135									
15431	T	0135									
15570	T	0137									
15572	T	0137									
15574	T	0137									
15576	T	0137									
15600	T	0137									
15610	T	0137									
15620	T	0137									
15630	T	0137									
15650	T	0137									
15731	T	0137									
15732	T	0137									
15734	T	0137									
15736	T	0137									
15738	T	0137									
15740	T	0136									
15750	T	0137									
15756	C										
15757	C										
15758	C										
15760	T	0137									
15770	T	0137									
15775	T	0133									
15776	T	0133									
15780	T	0022									
15781	T	0019									
15782	T	0019									
15783	T	0016									
15786	T	0013									
15787	T	0013									
15788	T	0013									
15789	T	0015									
15792	T	0015									
15793	T	0013									
15819	T	0134									
15820	T	0137									
15821	T	0137									
15822	T	0137									
15823	T	0137									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
15824	T	0137									
15825	T	0137									
15826	T	0137									
15828	T	0137									
15829	T	0137									
15830	T	0022									
15832	T	0022									
15833	T	0022									
15834	T	0022									
15835	T	0022									
15836	T	0021									
15837	T	0021									
15838	T	0021									
15839	T	0021									
15840	T	0137									
15841	T	0137									
15842	T	0137									
15845	T	0137									
15847	T	0022									
15850	T	0016									
15851	T	0016									
15852	X	0340									
15860	X	0340									
15876	T	0137									
15877	T	0137									
15878	T	0137									
15879	T	0137									
15920	T	0019									
15922	T	0137									
15931	T	0022									
15933	T	0022									
15934	T	0137									
15935	T	0137									
15936	T	0136									
15937	T	0137									
15940	T	0022									
15941	T	0022									
15944	T	0137									
15945	T	0137									
15946	T	0137									
15950	T	0022									
15951	T	0022									
15952	T	0136									
15953	T	0136									
15956	T	0136									
15958	T	0136									
15999	T	0019									
16000	T	0013									
16020	T	0015									
16025	T	0016									
16030	T	0016									
16035	T	0016									
16036	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
17000	T	0013									
17003	T	0012									
17004	T	0016									
17106	T	0016									
17107	T	0016									
17108	T	0016									
17110	T	0013									
17111	T	0015									
17250	T	0015									
17260	T	0015									
17261	T	0015									
17262	T	0015									
17263	T	0015									
17264	T	0015									
17266	T	0016									
17270	T	0015									
17271	T	0015									
17272	T	0015									
17273	T	0016									
17274	T	0016									
17276	T	0016									
17280	T	0015									
17281	T	0016									
17282	T	0016									
17283	T	0016									
17284	T	0016									
17286	T	0016									
17311	T	0694									
17312	T	0694									
17313	T	0694									
17314	T	0694									
17315	T	0694									
17340	T	0013									
17360	T	0013									
17380	T	0013									
17999	T	0012									
19000	T	0004									
19001	T	0002									
19020	T	0008									
19030	N										
19100	T	0004									
19101	T	0028									
19102	T	0005									
19103	T	0037									
19105	T	0029									
19110	T	0028									
19112	T	0028									
19120	T	0028									
19125	T	0028									
19126	T	0028									
19260	T	0021									
19271	C										
19272	C										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
19290	N										
19291	N										
19295	N										
19296	T	0648									
19297	T	0648									
19298	T	0648									
19300	T	0028									
19301	T	0028									
19302	T	0030									
19303	T	0029									
19304	T	0029									
19305	C										
19306	C										
19307	T	0030									
19316	T	0029									
19318	T	0030									
19324	T	0030									
19325	T	0648									
19328	T	0029									
19330	T	0029									
19340	T	0030									
19342	T	0648									
19350	T	0028									
19355	T	0029									
19357	T	0648									
19361	C										
19364	C										
19366	T	0029									
19367	C										
19368	C										
19369	C										
19370	T	0029									
19371	T	0029									
19380	T	0030									
19396	T	0029									
19499	T	0028									
20000	T	0006									
20005	T	0049									
2000F	M										
2001F	M										
2002F	M										
2004F	M										
20100	T	0023									
20101	T	0137									
20102	T	0137									
20103	T	0023									
2010F	M										
2014F	M										
20150	T	0051									
2018F	M										
2019F	M										
20200	T	0021									
20205	T	0021									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
20206	T	0005							
2020F	M								
2021F	M								
20220	T	0020							
20225	T	0020							
2022F	M								
20240	T	0022							
20245	T	0022							
2024F	M								
20250	T	0049							
20251	T	0049							
2026F	M								
2027F	M								
2028F	M								
2029F	M								
2030F	M								
2031F	M								
2035F	M								
20500	T	0251							
20501	N								
20520	T	0019							
20525	T	0022							
20526	T	0204							
20550	T	0204							
20551	T	0204							
20552	T	0204							
20553	T	0204							
20555	T	0050							
20600	T	0204							
20605	T	0204							
20610	T	0204							
20612	T	0204							
20615	T	0004							
20650	T	0049							
20660	C								
20661	C								
20662	T	0049							
20663	T	0049							
20664	C								
20665	X	0340							
20670	T	0021							
20680	T	0022							
20690	T	0050							
20692	T	0050							
20693	T	0049							
20694	T	0049							
20802	C								
20805	C								
20808	C								
20816	C								
20822	T	0054							
20824	C								
20827	C								

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
20838	C										
20900	T	0050									
20902	T	0050									
20910	T	0137									
20912	T	0137									
20920	T	0136									
20922	T	0136									
20924	T	0050									
20926	T	0135									
20930	C										
20931	C										
20936	C										
20937	C										
20938	C										
20950	T	0006									
20955	C										
20956	C										
20957	C										
20962	C										
20969	C										
20970	C										
20972	T	0056									
20973	T	0056									
20974	A										
20975	N										
20979	X	0340									
20982	T	0051									
20985	N										
20986	N										
20987	N										
20999	T	0049									
21010	T	0254									
21015	T	0253									
21025	T	0256									
21026	T	0256									
21029	T	0256									
21030	T	0254									
21031	T	0254									
21032	T	0254									
21034	T	0256									
21040	T	0254									
21044	T	0256									
21045	C										
21046	T	0256									
21047	T	0256									
21048	T	0256									
21049	T	0256									
21050	T	0256									
21060	T	0256									
21070	T	0256									
21073	T	0252									
21076	T	0254									
21077	T	0256									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
21079	T	0256							
21080	T	0256							
21081	T	0256							
21082	T	0256							
21083	T	0256							
21084	T	0256							
21085	T	0253							
21086	T	0256							
21087	T	0256							
21088	T	0256							
21089	T	0251							
21100	T	0256							
21110	T	0252							
21116	N								
21120	T	0254							
21121	T	0254							
21122	T	0254							
21123	T	0254							
21125	T	0254							
21127	T	0256							
21137	T	0254							
21138	T	0256							
21139	T	0256							
21141	C								
21142	C								
21143	C								
21145	C								
21146	C								
21147	C								
21150	T	0256							
21151	C								
21154	C								
21155	C								
21159	C								
21160	C								
21172	C								
21175	T	0256							
21179	C								
21180	C								
21181	T	0254							
21182	C								
21183	C								
21184	C								
21188	C								
21193	C								
21194	C								
21195	T	0256							
21196	C								
21198	T	0256							
21199	T	0256							
21206	T	0256							
21208	T	0256							
21209	T	0256							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
21210	T	0256									
21215	T	0256									
21230	T	0256									
21235	T	0254									
21240	T	0256									
21242	T	0256									
21243	T	0256									
21244	T	0256									
21245	T	0256									
21246	T	0256									
21247	C										
21248	T	0256									
21249	T	0256									
21255	C										
21256	C										
21260	T	0256									
21261	T	0256									
21263	T	0256									
21267	T	0256									
21268	C										
21270	T	0256									
21275	T	0256									
21280	T	0256									
21282	T	0253									
21295	T	0252									
21296	T	0254									
21299	T	0251									
21310	T	0251									
21315	T	0251									
21320	T	0253									
21325	T	0254									
21330	T	0254									
21335	T	0254									
21336	T	0062									
21337	T	0253									
21338	T	0254									
21339	T	0254									
21340	T	0256									
21343	C										
21344	C										
21345	T	0254									
21346	C										
21347	C										
21348	C										
21355	T	0256									
21356	T	0254									
21360	T	0254									
21365	T	0256									
21366	C										
21385	T	0256									
21386	C										
21387	C										
21390	T	0256									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
21395	C										
21400	T	0252									
21401	T	0253									
21406	T	0256									
21407	T	0256									
21408	T	0256									
21421	T	0254									
21422	C										
21423	C										
21431	C										
21432	C										
21433	C										
21435	C										
21436	C										
21440	T	0254									
21445	T	0254									
21450	T	0251									
21451	T	0252									
21452	T	0253									
21453	T	0256									
21454	T	0254									
21461	T	0256									
21462	T	0256									
21465	T	0256									
21470	T	0256									
21480	T	0251									
21485	T	0253									
21490	T	0256									
21495	T	0253									
21497	T	0253									
21499	T	0251									
21501	T	0008									
21502	T	0049									
21510	C										
21550	T	0020									
21555	T	0022									
21556	T	0022									
21557	T	0022									
21600	T	0050									
21610	T	0050									
21615	C										
21616	C										
21620	C										
21627	C										
21630	C										
21632	C										
21685	T	0252									
21700	T	0049									
21705	C										
21720	T	0049									
21725	T	0006									
21740	C										
21742	T	0051									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
21743	T	0051									
21750	C										
21800	T	0043									
21805	T	0062									
21810	C										
21820	T	0043									
21825	C										
21899	T	0251									
21920	T	0020									
21925	T	0022									
21930	T	0022									
21935	T	0022									
22010	C										
22015	C										
22100	T	0208									
22101	T	0208									
22102	T	0208									
22103	T	0208									
22110	C										
22112	C										
22114	C										
22116	C										
22206	C										
22207	C										
22208	C										
22210	C										
22212	C										
22214	C										
22216	C										
22220	C										
22222	T	0208									
22224	C										
22226	C										
22305	T	0043									
22310	T	0043									
22315	T	0043									
22318	C										
22319	C										
22325	C										
22326	C										
22327	C										
22328	C										
22505	T	0045									
22520	T	0050									
22521	T	0050									
22522	T	0050									
22523	T	0052									
22524	T	0052									
22525	T	0052									
22526	T	0050									
22527	T	0050									
22532	C										
22533	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
22534	C										
22548	C										
22554	C										
22556	C										
22558	C										
22585	C										
22590	C										
22595	C										
22600	C										
22610	C										
22612	T	0208									
22614	T	0208									
22630	C										
22632	C										
22800	C										
22802	C										
22804	C										
22808	C										
22810	C										
22812	C										
22818	C										
22819	C										
22830	C										
22840	C										
22841	C										
22842	C										
22843	C										
22844	C										
22845	C										
22846	C										
22847	C										
22848	C										
22849	C										
22850	C										
22851	T	0049									
22852	C										
22855	C										
22857	C										
22862	C										
22865	C										
22899	T	0049									
22900	T	0022									
22999	T	0049									
23000	T	0021									
23020	T	0051									
23030	T	0008									
23031	T	0008									
23035	T	0049									
23040	T	0050									
23044	T	0050									
23065	T	0020									
23066	T	0022									
23075	T	0021									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
23076	T	0022							
23077	T	0022							
23100	T	0049							
23101	T	0050							
23105	T	0050							
23106	T	0050							
23107	T	0050							
23120	T	0050							
23125	T	0050							
23130	T	0051							
23140	T	0049							
23145	T	0050							
23146	T	0050							
23150	T	0050							
23155	T	0050							
23156	T	0050							
23170	T	0050							
23172	T	0050							
23174	T	0050							
23180	T	0050							
23182	T	0050							
23184	T	0050							
23190	T	0050							
23195	T	0050							
23200	C								
23210	C								
23220	C								
23221	C								
23222	C								
23330	T	0020							
23331	T	0022							
23332	C								
23350	N								
23395	T	0051							
23397	T	0052							
23400	T	0050							
23405	T	0050							
23406	T	0050							
23410	T	0051							
23412	T	0051							
23415	T	0051							
23420	T	0051							
23430	T	0051							
23440	T	0051							
23450	T	0052							
23455	T	0052							
23460	T	0052							
23462	T	0051							
23465	T	0052							
23466	T	0051							
23470	T	0425							
23472	C								
23480	T	0051							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
23485	T	0052							
23490	T	0051							
23491	T	0052							
23500	T	0043							
23505	T	0043							
23515	T	0064							
23520	T	0043							
23525	T	0043							
23530	T	0063							
23532	T	0062							
23540	T	0043							
23545	T	0043							
23550	T	0063							
23552	T	0063							
23570	T	0043							
23575	T	0043							
23585	T	0064							
23600	T	0043							
23605	T	0043							
23615	T	0064							
23616	T	0064							
23620	T	0043							
23625	T	0043							
23630	T	0064							
23650	T	0043							
23655	T	0045							
23660	T	0063							
23665	T	0043							
23670	T	0064							
23675	T	0043							
23680	T	0063							
23700	T	0045							
23800	T	0052							
23802	T	0051							
23900	C								
23920	C								
23921	T	0136							
23929	T	0043							
23930	T	0008							
23931	T	0008							
23935	T	0049							
24000	T	0050							
24006	T	0050							
24065	T	0021							
24066	T	0021							
24075	T	0021							
24076	T	0022							
24077	T	0022							
24100	T	0049							
24101	T	0050							
24102	T	0050							
24105	T	0049							
24110	T	0049							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
24115	T	0050									
24116	T	0050									
24120	T	0049									
24125	T	0050									
24126	T	0050									
24130	T	0050									
24134	T	0050									
24136	T	0050									
24138	T	0050									
24140	T	0050									
24145	T	0050									
24147	T	0050									
24149	T	0050									
24150	T	0051									
24151	T	0052									
24152	T	0051									
24153	T	0052									
24155	T	0051									
24160	T	0050									
24164	T	0050									
24200	T	0019									
24201	T	0021									
24220	N										
24300	T	0045									
24301	T	0050									
24305	T	0050									
24310	T	0049									
24320	T	0051									
24330	T	0052									
24331	T	0051									
24332	T	0049									
24340	T	0051									
24341	T	0051									
24342	T	0051									
24343	T	0050									
24344	T	0052									
24345	T	0050									
24346	T	0051									
24350	D										
24351	D										
24352	D										
24354	D										
24356	D										
24357	T	0050									
24358	T	0050									
24359	T	0050									
24360	T	0047									
24361	T	0425									
24362	T	0048									
24363	T	0425									
24365	T	0047									
24366	T	0425									
24400	T	0050									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
24410	T	0050									
24420	T	0051									
24430	T	0052									
24435	T	0052									
24470	T	0051									
24495	T	0050									
24498	T	0052									
24500	T	0043									
24505	T	0043									
24515	T	0064									
24516	T	0064									
24530	T	0043									
24535	T	0043									
24538	T	0062									
24545	T	0064									
24546	T	0064									
24560	T	0043									
24565	T	0043									
24566	T	0062									
24575	T	0064									
24576	T	0043									
24577	T	0043									
24579	T	0064									
24582	T	0062									
24586	T	0064									
24587	T	0064									
24600	T	0043									
24605	T	0045									
24615	T	0064									
24620	T	0043									
24635	T	0064									
24640	T	0043									
24650	T	0043									
24655	T	0043									
24665	T	0063									
24666	T	0064									
24670	T	0043									
24675	T	0043									
24685	T	0063									
24800	T	0051									
24802	T	0051									
24900	C										
24920	C										
24925	T	0049									
24930	C										
24931	C										
24935	T	0052									
24940	C										
24999	T	0043									
25000	T	0049									
25001	T	0049									
25020	T	0049									
25023	T	0050									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
25024	T	0050									
25025	T	0050									
25028	T	0049									
25031	T	0049									
25035	T	0049									
25040	T	0050									
25065	T	0020									
25066	T	0022									
25075	T	0021									
25076	T	0022									
25077	T	0022									
25085	T	0049									
25100	T	0049									
25101	T	0050									
25105	T	0050									
25107	T	0050									
25109	T	0049									
25110	T	0049									
25111	T	0053									
25112	T	0053									
25115	T	0049									
25116	T	0049									
25118	T	0050									
25119	T	0050									
25120	T	0050									
25125	T	0050									
25126	T	0050									
25130	T	0050									
25135	T	0050									
25136	T	0050									
25145	T	0050									
25150	T	0050									
25151	T	0050									
25170	T	0051									
25210	T	0054									
25215	T	0054									
25230	T	0050									
25240	T	0050									
25246	N										
25248	T	0049									
25250	T	0050									
25251	T	0050									
25259	T	0043									
25260	T	0050									
25263	T	0050									
25265	T	0050									
25270	T	0050									
25272	T	0050									
25274	T	0050									
25275	T	0050									
25280	T	0050									
25290	T	0050									
25295	T	0049									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
25300	T	0050									
25301	T	0050									
25310	T	0051									
25312	T	0051									
25315	T	0051									
25316	T	0052									
25320	T	0051									
25332	T	0047									
25335	T	0051									
25337	T	0051									
25350	T	0052									
25355	T	0051									
25360	T	0050									
25365	T	0050									
25370	T	0051									
25375	T	0051									
25390	T	0050									
25391	T	0051									
25392	T	0050									
25393	T	0051									
25394	T	0053									
25400	T	0052									
25405	T	0052									
25415	T	0052									
25420	T	0052									
25425	T	0051									
25426	T	0051									
25430	T	0054									
25431	T	0054									
25440	T	0052									
25441	T	0425									
25442	T	0425									
25443	T	0048									
25444	T	0048									
25445	T	0048									
25446	T	0425									
25447	T	0047									
25449	T	0047									
25450	T	0051									
25455	T	0051									
25490	T	0051									
25491	T	0051									
25492	T	0051									
25500	T	0043									
25505	T	0043									
25515	T	0063									
25520	T	0043									
25525	T	0063									
25526	T	0063									
25530	T	0043									
25535	T	0043									
25545	T	0063									
25560	T	0043									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
25565	T	0043									
25574	T	0064									
25575	T	0064									
25600	T	0043									
25605	T	0043									
25606	T	0062									
25607	T	0064									
25608	T	0064									
25609	T	0064									
25622	T	0043									
25624	T	0043									
25628	T	0063									
25630	T	0043									
25635	T	0043									
25645	T	0063									
25650	T	0043									
25651	T	0062									
25652	T	0063									
25660	T	0043									
25670	T	0062									
25671	T	0062									
25675	T	0043									
25676	T	0062									
25680	T	0043									
25685	T	0062									
25690	T	0043									
25695	T	0062									
25800	T	0052									
25805	T	0051									
25810	T	0052									
25820	T	0053									
25825	T	0052									
25830	T	0052									
25900	C										
25905	C										
25907	T	0049									
25909	C										
25915	C										
25920	C										
25922	T	0049									
25924	C										
25927	C										
25929	T	0136									
25931	T	0049									
25999	T	0043									
26010	T	0006									
26011	T	0007									
26020	T	0053									
26025	T	0053									
26030	T	0053									
26034	T	0053									
26035	T	0053									
26037	T	0053									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
26040	T	0054									
26045	T	0054									
26055	T	0053									
26060	T	0053									
26070	T	0053									
26075	T	0053									
26080	T	0053									
26100	T	0053									
26105	T	0053									
26110	T	0053									
26115	T	0022									
26116	T	0022									
26117	T	0022									
26121	T	0054									
26123	T	0054									
26125	T	0053									
26130	T	0053									
26135	T	0054									
26140	T	0053									
26145	T	0053									
26160	T	0053									
26170	T	0053									
26180	T	0053									
26185	T	0053									
26200	T	0053									
26205	T	0054									
26210	T	0053									
26215	T	0053									
26230	T	0053									
26235	T	0053									
26236	T	0053									
26250	T	0053									
26255	T	0054									
26260	T	0053									
26261	T	0053									
26262	T	0053									
26320	T	0021									
26340	T	0043									
26350	T	0054									
26352	T	0054									
26356	T	0054									
26357	T	0054									
26358	T	0054									
26370	T	0054									
26372	T	0054									
26373	T	0054									
26390	T	0054									
26392	T	0054									
26410	T	0053									
26412	T	0054									
26415	T	0054									
26416	T	0054									
26418	T	0053									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
26420	T	0054									
26426	T	0054									
26428	T	0054									
26432	T	0053									
26433	T	0053									
26434	T	0054									
26437	T	0053									
26440	T	0053									
26442	T	0054									
26445	T	0053									
26449	T	0054									
26450	T	0053									
26455	T	0053									
26460	T	0053									
26471	T	0053									
26474	T	0053									
26476	T	0053									
26477	T	0053									
26478	T	0053									
26479	T	0053									
26480	T	0054									
26483	T	0054									
26485	T	0054									
26489	T	0054									
26490	T	0054									
26492	T	0054									
26494	T	0054									
26496	T	0054									
26497	T	0054									
26498	T	0054									
26499	T	0054									
26500	T	0053									
26502	T	0054									
26508	T	0053									
26510	T	0054									
26516	T	0054									
26517	T	0054									
26518	T	0054									
26520	T	0053									
26525	T	0053									
26530	T	0047									
26531	T	0048									
26535	T	0047									
26536	T	0048									
26540	T	0053									
26541	T	0054									
26542	T	0053									
26545	T	0054									
26546	T	0054									
26548	T	0054									
26550	T	0054									
26551	C										
26553	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
26554	C										
26555	T	0054									
26556	C										
26560	T	0053									
26561	T	0054									
26562	T	0054									
26565	T	0054									
26567	T	0054									
26568	T	0054									
26580	T	0053									
26587	T	0053									
26590	T	0053									
26591	T	0054									
26593	T	0053									
26596	T	0053									
26600	T	0043									
26605	T	0043									
26607	T	0043									
26608	T	0062									
26615	T	0063									
26641	T	0043									
26645	T	0043									
26650	T	0062									
26665	T	0063									
26670	T	0043									
26675	T	0043									
26676	T	0062									
26685	T	0062									
26686	T	0064									
26700	T	0043									
26705	T	0043									
26706	T	0043									
26715	T	0062									
26720	T	0043									
26725	T	0043									
26727	T	0062									
26735	T	0062									
26740	T	0043									
26742	T	0043									
26746	T	0062									
26750	T	0043									
26755	T	0043									
26756	T	0062									
26765	T	0062									
26770	T	0043									
26775	T	0045									
26776	T	0062									
26785	T	0062									
26820	T	0054									
26841	T	0054									
26842	T	0054									
26843	T	0054									
26844	T	0054									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
26850	T	0054									
26852	T	0054									
26860	T	0054									
26861	T	0054									
26862	T	0054									
26863	T	0054									
26910	T	0054									
26951	T	0053									
26952	T	0053									
26989	T	0043									
26990	T	0049									
26991	T	0049									
26992	C										
27000	T	0049									
27001	T	0050									
27003	T	0050									
27005	C										
27006	T	0050									
27025	C										
27030	C										
27033	T	0051									
27035	T	0051									
27036	C										
27040	T	0020									
27041	T	0020									
27047	T	0022									
27048	T	0022									
27049	T	0022									
27050	T	0049									
27052	T	0049									
27054	C										
27060	T	0049									
27062	T	0049									
27065	T	0049									
27066	T	0050									
27067	T	0050									
27070	C										
27071	C										
27075	C										
27076	C										
27077	C										
27078	C										
27079	C										
27080	T	0050									
27086	T	0020									
27087	T	0049									
27090	C										
27091	C										
27093	N										
27095	N										
27096	B										
27097	T	0050									
27098	T	0050									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
27100	T	0051									
27105	T	0051									
27110	T	0051									
27111	T	0051									
27120	C										
27122	C										
27125	C										
27130	C										
27132	C										
27134	C										
27137	C										
27138	C										
27140	C										
27146	C										
27147	C										
27151	C										
27156	C										
27158	C										
27161	C										
27165	C										
27170	C										
27175	C										
27176	C										
27177	C										
27178	C										
27179	C										
27181	C										
27185	C										
27187	C										
27193	T	0043									
27194	T	0045									
27200	T	0043									
27202	T	0063									
27215	C										
27216	T	0050									
27217	C										
27218	C										
27220	T	0043									
27222	C										
27226	C										
27227	C										
27228	C										
27230	T	0043									
27232	C										
27235	T	0050									
27236	C										
27238	T	0043									
27240	C										
27244	C										
27245	C										
27246	T	0043									
27248	C										
27250	T	0043									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
27252	T	0045									
27253	C										
27254	C										
27256	T	0043									
27257	T	0045									
27258	C										
27259	C										
27265	T	0043									
27266	T	0045									
27267	T	0043									
27268	C										
27269	C										
27275	T	0045									
27280	C										
27282	C										
27284	C										
27286	C										
27290	C										
27295	C										
27299	T	0043									
27301	T	0008									
27303	C										
27305	T	0049									
27306	T	0049									
27307	T	0049									
27310	T	0050									
27323	T	0020									
27324	T	0022									
27325	T	0220									
27326	T	0220									
27327	T	0022									
27328	T	0022									
27329	T	0022									
27330	T	0050									
27331	T	0050									
27332	T	0050									
27333	T	0050									
27334	T	0050									
27335	T	0050									
27340	T	0049									
27345	T	0049									
27347	T	0049									
27350	T	0050									
27355	T	0050									
27356	T	0050									
27357	T	0050									
27358	T	0050									
27360	T	0050									
27365	C										
27370	N										
27372	T	0022									
27380	T	0049									
27381	T	0049									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
27385	T	0049									
27386	T	0049									
27390	T	0049									
27391	T	0049									
27392	T	0049									
27393	T	0050									
27394	T	0050									
27395	T	0051									
27396	T	0050									
27397	T	0051									
27400	T	0051									
27403	T	0050									
27405	T	0051									
27407	T	0052									
27409	T	0051									
27412	T	0042									
27415	T	0042									
27416	T	0051									
27418	T	0051									
27420	T	0051									
27422	T	0051									
27424	T	0051									
27425	T	0050									
27427	T	0051									
27428	T	0052									
27429	T	0052									
27430	T	0051									
27435	T	0051									
27437	T	0047									
27438	T	0048									
27440	T	0047									
27441	T	0047									
27442	T	0047									
27443	T	0047									
27445	C										
27446	T	0681									
27447	C										
27448	C										
27450	C										
27454	C										
27455	C										
27457	C										
27465	C										
27466	C										
27468	C										
27470	C										
27472	C										
27475	T	0050									
27477	C										
27479	C										
27485	C										
27486	C										
27487	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
27488	C										
27495	C										
27496	T	0049									
27497	T	0049									
27498	T	0049									
27499	T	0049									
27500	T	0043									
27501	T	0043									
27502	T	0043									
27503	T	0043									
27506	C										
27507	C										
27508	T	0043									
27509	T	0062									
27510	T	0043									
27511	C										
27513	C										
27514	C										
27516	T	0043									
27517	T	0043									
27519	C										
27520	T	0043									
27524	T	0063									
27530	T	0043									
27532	T	0043									
27535	C										
27536	C										
27538	T	0043									
27540	C										
27550	T	0043									
27552	T	0045									
27556	C										
27557	C										
27558	C										
27560	T	0043									
27562	T	0045									
27566	T	0063									
27570	T	0045									
27580	C										
27590	C										
27591	C										
27592	C										
27594	T	0049									
27596	C										
27598	C										
27599	T	0043									
27600	T	0049									
27601	T	0049									
27602	T	0049									
27603	T	0008									
27604	T	0049									
27605	T	0055									
27606	T	0049									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
27607	T	0049									
27610	T	0050									
27612	T	0050									
27613	T	0020									
27614	T	0022									
27615	T	0050									
27618	T	0021									
27619	T	0022									
27620	T	0050									
27625	T	0050									
27626	T	0050									
27630	T	0049									
27635	T	0050									
27637	T	0050									
27638	T	0050									
27640	T	0051									
27641	T	0050									
27645	C										
27646	C										
27647	T	0051									
27648	N										
27650	T	0051									
27652	T	0052									
27654	T	0051									
27656	T	0049									
27658	T	0049									
27659	T	0049									
27664	T	0049									
27665	T	0050									
27675	T	0049									
27676	T	0050									
27680	T	0050									
27681	T	0050									
27685	T	0050									
27686	T	0050									
27687	T	0050									
27690	T	0051									
27691	T	0051									
27692	T	0051									
27695	T	0050									
27696	T	0050									
27698	T	0050									
27700	T	0047									
27702	C										
27703	C										
27704	T	0049									
27705	T	0051									
27707	T	0049									
27709	T	0050									
27712	C										
27715	C										
27720	T	0063									
27722	T	0064									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
27724	C										
27725	C										
27726	T	0062									
27727	C										
27730	T	0050									
27732	T	0050									
27734	T	0050									
27740	T	0050									
27742	T	0051									
27745	T	0052									
27750	T	0043									
27752	T	0043									
27756	T	0062									
27758	T	0063									
27759	T	0064									
27760	T	0043									
27762	T	0043									
27766	T	0063									
27767	T	0043									
27768	T	0043									
27769	T	0063									
27780	T	0043									
27781	T	0043									
27784	T	0063									
27786	T	0043									
27788	T	0043									
27792	T	0063									
27808	T	0043									
27810	T	0043									
27814	T	0063									
27816	T	0043									
27818	T	0043									
27822	T	0063									
27823	T	0064									
27824	T	0043									
27825	T	0043									
27826	T	0063									
27827	T	0064									
27828	T	0064									
27829	T	0063									
27830	T	0043									
27831	T	0043									
27832	T	0063									
27840	T	0043									
27842	T	0045									
27846	T	0063									
27848	T	0063									
27860	T	0045									
27870	T	0052									
27871	T	0052									
27880	C										
27881	C										
27882	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
27884	T	0049									
27886	C										
27888	C										
27889	T	0050									
27892	T	0049									
27893	T	0049									
27894	T	0049									
27899	T	0043									
28001	T	0007									
28002	T	0049									
28003	T	0049									
28005	T	0055									
28008	T	0055									
28010	T	0055									
28011	T	0055									
28020	T	0055									
28022	T	0055									
28024	T	0055									
28035	T	0220									
28043	T	0022									
28045	T	0055									
28046	T	0055									
28050	T	0055									
28052	T	0055									
28054	T	0055									
28055	T	0220									
28060	T	0055									
28062	T	0055									
28070	T	0055									
28072	T	0055									
28080	T	0055									
28086	T	0055									
28088	T	0055									
28090	T	0055									
28092	T	0055									
28100	T	0055									
28102	T	0056									
28103	T	0056									
28104	T	0055									
28106	T	0056									
28107	T	0056									
28108	T	0055									
28110	T	0055									
28111	T	0055									
28112	T	0055									
28113	T	0055									
28114	T	0055									
28116	T	0055									
28118	T	0055									
28119	T	0055									
28120	T	0055									
28122	T	0055									
28124	T	0055									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
28126	T	0055									
28130	T	0055									
28140	T	0055									
28150	T	0055									
28153	T	0055									
28160	T	0055									
28171	T	0055									
28173	T	0055									
28175	T	0055									
28190	T	0019									
28192	T	0021									
28193	T	0020									
28200	T	0055									
28202	T	0055									
28208	T	0055									
28210	T	0056									
28220	T	0055									
28222	T	0055									
28225	T	0055									
28226	T	0055									
28230	T	0055									
28232	T	0055									
28234	T	0055									
28238	T	0056									
28240	T	0055									
28250	T	0055									
28260	T	0055									
28261	T	0055									
28262	T	0055									
28264	T	0056									
28270	T	0055									
28272	T	0055									
28280	T	0055									
28285	T	0055									
28286	T	0055									
28288	T	0055									
28289	T	0055									
28290	T	0057									
28292	T	0057									
28293	T	0057									
28294	T	0057									
28296	T	0057									
28297	T	0057									
28298	T	0057									
28299	T	0057									
28300	T	0056									
28302	T	0055									
28304	T	0056									
28305	T	0056									
28306	T	0055									
28307	T	0055									
28308	T	0055									
28309	T	0056									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
28310	T	0055									
28312	T	0055									
28313	T	0055									
28315	T	0055									
28320	T	0056									
28322	T	0056									
28340	T	0055									
28341	T	0055									
28344	T	0055									
28345	T	0055									
28360	T	0056									
28400	T	0043									
28405	T	0043									
28406	T	0062									
28415	T	0064									
28420	T	0063									
28430	T	0043									
28435	T	0043									
28436	T	0062									
28445	T	0063									
28446	T	0056									
28450	T	0043									
28455	T	0043									
28456	T	0062									
28465	T	0063									
28470	T	0043									
28475	T	0043									
28476	T	0062									
28485	T	0063									
28490	T	0043									
28495	T	0043									
28496	T	0062									
28505	T	0062									
28510	T	0043									
28515	T	0043									
28525	T	0062									
28530	T	0043									
28531	T	0062									
28540	T	0043									
28545	T	0062									
28546	T	0062									
28555	T	0063									
28570	T	0043									
28575	T	0043									
28576	T	0062									
28585	T	0062									
28600	T	0043									
28605	T	0043									
28606	T	0062									
28615	T	0063									
28630	T	0043									
28635	T	0045									
28636	T	0062									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
28645	T	0062									
28660	T	0043									
28665	T	0045									
28666	T	0062									
28675	T	0062									
28705	T	0056									
28715	T	0052									
28725	T	0056									
28730	T	0056									
28735	T	0056									
28737	T	0056									
28740	T	0056									
28750	T	0056									
28755	T	0055									
28760	T	0056									
28800	C										
28805	C										
28810	T	0055									
28820	T	0055									
28825	T	0055									
28890	T	0050									
28899	T	0043									
29000	S	0058									
29010	S	0426									
29015	S	0426									
29020	S	0058									
29025	S	0058									
29035	S	0426									
29040	S	0058									
29044	S	0426									
29046	S	0426									
29049	S	0058									
29055	S	0426									
29058	S	0058									
29065	S	0426									
29075	S	0426									
29085	S	0058									
29086	S	0058									
29105	S	0058									
29125	S	0058									
29126	S	0058									
29130	S	0058									
29131	S	0058									
29200	S	0058									
29220	S	0058									
29240	S	0058									
29260	S	0058									
29280	S	0058									
29305	S	0426									
29325	S	0426									
29345	S	0426									
29355	S	0426									
29358	S	0426									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
29365	S	0426									
29405	S	0426									
29425	S	0426									
29435	S	0426									
29440	S	0058									
29445	S	0426									
29450	S	0058									
29505	S	0058									
29515	S	0058									
29520	S	0058									
29530	S	0058									
29540	S	0058									
29550	S	0058									
29580	S	0058									
29590	S	0058									
29700	S	0058									
29705	S	0058									
29710	S	0426									
29715	S	0058									
29720	S	0058									
29730	S	0058									
29740	S	0058									
29750	S	0058									
29799	S	0058									
29800	T	0041									
29804	T	0041									
29805	T	0041									
29806	T	0042									
29807	T	0042									
29819	T	0042									
29820	T	0042									
29821	T	0042									
29822	T	0041									
29823	T	0042									
29824	T	0041									
29825	T	0042									
29826	T	0042									
29827	T	0042									
29828	T	0042									
29830	T	0041									
29834	T	0041									
29835	T	0041									
29836	T	0041									
29837	T	0041									
29838	T	0041									
29840	T	0041									
29843	T	0041									
29844	T	0041									
29845	T	0041									
29846	T	0041									
29847	T	0042									
29848	T	0041									
29850	T	0041									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
29851	T	0042									
29855	T	0042									
29856	T	0042									
29860	T	0042									
29861	T	0042									
29862	T	0042									
29863	T	0042									
29866	T	0042									
29867	T	0042									
29868	T	0042									
29870	T	0041									
29871	T	0041									
29873	T	0041									
29874	T	0041									
29875	T	0041									
29876	T	0041									
29877	T	0041									
29879	T	0041									
29880	T	0041									
29881	T	0041									
29882	T	0041									
29883	T	0041									
29884	T	0041									
29885	T	0042									
29886	T	0041									
29887	T	0041									
29888	T	0042									
29889	T	0042									
29891	T	0042									
29892	T	0042									
29893	T	0055									
29894	T	0041									
29895	T	0041									
29897	T	0041									
29898	T	0041									
29899	T	0042									
29900	T	0041									
29901	T	0041									
29902	T	0041									
29904	T	0041									
29905	T	0041									
29906	T	0041									
29907	T	0042									
29999	T	0041									
30000	T	0251									
30020	T	0251									
3006F	M										
30100	T	0252									
30110	T	0253									
30115	T	0253									
30117	T	0253									
30118	T	0254									
3011F	M										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
30120	T	0253									
30124	T	0252									
30125	T	0256									
30130	T	0253									
30140	T	0254									
3014F	M										
30150	T	0256									
30160	T	0256									
3017F	M										
30200	T	0252									
3020F	M										
30210	T	0252									
3021F	M										
30220	T	0252									
3022F	M										
3023F	M										
3025F	M										
3027F	M										
3028F	M										
30300	X	0340									
30310	T	0253									
30320	T	0253									
3035F	M										
3037F	M										
30400	T	0256									
3040F	M										
30410	T	0256									
30420	T	0256									
3042F	M										
30430	T	0254									
30435	T	0256									
3044F	M										
30450	T	0256									
3045F	M										
30460	T	0256									
30462	T	0256									
30465	T	0256									
3046F	M										
3048F	M										
3049F	M										
3050F	M										
30520	T	0254									
30540	T	0256									
30545	T	0256									
30560	T	0251									
30580	T	0256									
30600	T	0256									
3060F	M										
3061F	M										
30620	T	0256									
3062F	M										
30630	T	0254									
3066F	M										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
3072F	M										
3073F	M										
3074F	M										
3075F	M										
3077F	M										
3078F	M										
3079F	M										
30801	T	0252									
30802	T	0252									
3080F	M										
3082F	M										
3083F	M										
3084F	M										
3085F	M										
3088F	M										
3089F	M										
30901	T	0250									
30903	T	0250									
30905	T	0250									
30906	T	0250									
3090F	M										
30915	T	0092									
3091F	M										
30920	T	0092									
3092F	M										
30930	T	0253									
3093F	M										
3095F	M										
3096F	M										
30999	T	0251									
31000	T	0251									
31002	T	0252									
3100F	M										
31020	T	0254									
31030	T	0256									
31032	T	0256									
31040	T	0254									
31050	T	0256									
31051	T	0256									
31070	T	0254									
31075	T	0256									
31080	T	0256									
31081	T	0256									
31084	T	0256									
31085	T	0256									
31086	T	0256									
31087	T	0256									
31090	T	0256									
3110F	M										
3111F	M										
3112F	M										
31200	T	0256									
31201	T	0256									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
31205	T	0256							
3120F	M								
31225	C								
31230	C								
31231	T	0072							
31233	T	0072							
31235	T	0074							
31237	T	0074							
31238	T	0074							
31239	T	0075							
31240	T	0074							
31254	T	0075							
31255	T	0075							
31256	T	0075							
31267	T	0075							
31276	T	0075							
31287	T	0075							
31288	T	0075							
31290	C								
31291	C								
31292	T	0075							
31293	T	0075							
31294	T	0075							
31299	T	0251							
31300	T	0254							
3130F	M								
31320	T	0256							
3132F	M								
31360	C								
31365	C								
31367	C								
31368	C								
31370	C								
31375	C								
31380	C								
31382	C								
31390	C								
31395	C								
31400	T	0256							
3140F	M								
3141F	M								
31420	T	0256							
3142F	M								
31500	S	0094							
31502	S	0078							
31505	T	0071							
3150F	M								
31510	T	0074							
31511	T	0072							
31512	T	0074							
31513	T	0072							
31515	T	0074							
31520	T	0072							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
31525	T	0074									
31526	T	0075									
31527	T	0075									
31528	T	0074									
31529	T	0074									
31530	T	0075									
31531	T	0075									
31535	T	0075									
31536	T	0075									
31540	T	0075									
31541	T	0075									
31545	T	0075									
31546	T	0075									
3155F	M										
31560	T	0075									
31561	T	0075									
31570	T	0074									
31571	T	0075									
31575	T	0072									
31576	T	0075									
31577	T	0073									
31578	T	0075									
31579	T	0073									
31580	T	0256									
31582	T	0256									
31584	C										
31587	C										
31588	T	0256									
31590	T	0256									
31595	T	0256									
31599	T	0251									
31600	T	0254									
31601	T	0254									
31603	T	0252									
31605	T	0252									
3160F	M										
31610	T	0254									
31611	T	0254									
31612	T	0254									
31613	T	0254									
31614	T	0256									
31615	T	0076									
31620	N										
31622	T	0076									
31623	T	0076									
31624	T	0076									
31625	T	0076									
31628	T	0076									
31629	T	0076									
31630	T	0415									
31631	T	0415									
31632	T	0076									
31633	T	0076									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
31635	T	0076									
31636	T	0415									
31637	T	0076									
31638	T	0415									
31640	T	0415									
31641	T	0415									
31643	T	0076									
31645	T	0076									
31646	T	0076									
31656	T	0076									
3170F	M										
31715	N										
31717	T	0073									
31720	S	0077									
31725	C										
31730	T	0073									
31750	T	0256									
31755	T	0256									
31760	C										
31766	C										
31770	C										
31775	C										
31780	C										
31781	C										
31785	T	0254									
31786	C										
31800	C										
31805	C										
31820	T	0253									
31825	T	0254									
31830	T	0254									
31899	T	0076									
32000	D										
32002	D										
32005	D										
3200F	M										
32019	D										
32020	D										
32035	C										
32036	C										
32095	C										
32100	C										
3210F	M										
32110	C										
32120	C										
32124	C										
32140	C										
32141	C										
32150	C										
32151	C										
3215F	M										
32160	C										
3216F	M										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
3218F	M										
32200	C										
32201	T	0070									
3220F	M										
32215	C										
32220	C										
32225	C										
3230F	M										
32310	C										
32320	C										
32400	T	0685									
32402	C										
32405	T	0685									
32420	T	0070									
32421	T	0070									
32422	T	0070									
32440	C										
32442	C										
32445	C										
32480	C										
32482	C										
32484	C										
32486	C										
32488	C										
32491	C										
32500	C										
32501	C										
32503	C										
32504	C										
32540	C										
32550	T	0652									
32551	T	0070									
32560	T	0070									
32601	T	0069									
32602	T	0069									
32603	T	0069									
32604	T	0069									
32605	T	0069									
32606	T	0069									
3260F	M										
32650	C										
32651	C										
32652	C										
32653	C										
32654	C										
32655	C										
32656	C										
32657	C										
32658	C										
32659	C										
3265F	M										
32660	C										
32661	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
32662	C										
32663	C										
32664	C										
32665	C										
3266F	M										
3268F	M										
3269F	M										
3270F	M										
3271F	M										
3272F	M										
3273F	M										
3274F	M										
3278F	M										
3279F	M										
32800	C										
3280F	M										
32810	C										
32815	C										
3281F	M										
32820	C										
3284F	M										
32850	C										
32851	C										
32852	C										
32853	C										
32854	C										
32855	C										
32856	C										
3285F	M										
3288F	M										
32900	C										
32905	C										
32906	C										
3290F	M										
3291F	M										
3292F	M										
32940	C										
32960	T	0070									
32997	C										
32998	T	0423									
32999	T	0070									
3300F	M										
33010	T	0070									
33011	T	0070									
33015	C										
3301F	M										
33020	C										
33025	C										
3302F	M										
33030	C										
33031	C										
3303F	M										
3304F	M										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
33050	C										
3305F	M										
3306F	M										
3307F	M										
3308F	M										
3309F	M										
3310F	M										
3311F	M										
33120	C										
3312F	M										
33130	C										
3313F	M										
33140	C										
33141	C										
3314F	M										
3315F	M										
3316F	M										
3317F	M										
3318F	M										
3319F	M										
33202	C										
33203	C										
33206	T	0089									
33207	T	0089									
33208	T	0655									
3320F	M										
33210	T	0106									
33211	T	0106									
33212	T	0090									
33213	T	0654									
33214	T	0655									
33215	T	0105									
33216	T	0106									
33217	T	0106									
33218	T	0105									
33220	T	0105									
33222	T	0136									
33223	T	0136									
33224	T	0418									
33225	T	0418									
33226	T	0105									
33233	T	0105									
33234	T	0105									
33235	T	0105									
33236	C										
33237	C										
33238	C										
33240	T	0107									
33241	T	0105									
33243	C										
33244	T	0105									
33249	T	0108									
33250	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
33251	C										
33254	C										
33255	C										
33256	C										
33257	C										
33258	C										
33259	C										
3325F	M										
33261	C										
33265	C										
33266	C										
33282	S	0680									
33284	T	0020									
33300	C										
33305	C										
33310	C										
33315	C										
33320	C										
33321	C										
33322	C										
33330	C										
33332	C										
33335	C										
33400	C										
33401	C										
33403	C										
33404	C										
33405	C										
33406	C										
33410	C										
33411	C										
33412	C										
33413	C										
33414	C										
33415	C										
33416	C										
33417	C										
33420	C										
33422	C										
33425	C										
33426	C										
33427	C										
33430	C										
33460	C										
33463	C										
33464	C										
33465	C										
33468	C										
33470	C										
33471	C										
33472	C										
33474	C										
33475	C										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
33476	C										
33478	C										
33496	C										
33500	C										
33501	C										
33502	C										
33503	C										
33504	C										
33505	C										
33506	C										
33507	C										
33508	N										
33510	C										
33511	C										
33512	C										
33513	C										
33514	C										
33516	C										
33517	C										
33518	C										
33519	C										
33521	C										
33522	C										
33523	C										
33530	C										
33533	C										
33534	C										
33535	C										
33536	C										
33542	C										
33545	C										
33548	C										
33572	C										
33600	C										
33602	C										
33606	C										
33608	C										
33610	C										
33611	C										
33612	C										
33615	C										
33617	C										
33619	C										
33641	C										
33645	C										
33647	C										
33660	C										
33665	C										
33670	C										
33675	C										
33676	C										
33677	C										
33681	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
33684	C										
33688	C										
33690	C										
33692	C										
33694	C										
33697	C										
33702	C										
33710	C										
33720	C										
33722	C										
33724	C										
33726	C										
33730	C										
33732	C										
33735	C										
33736	C										
33737	C										
33750	C										
33755	C										
33762	C										
33764	C										
33766	C										
33767	C										
33768	C										
33770	C										
33771	C										
33774	C										
33775	C										
33776	C										
33777	C										
33778	C										
33779	C										
33780	C										
33781	C										
33786	C										
33788	C										
33800	C										
33802	C										
33803	C										
33813	C										
33814	C										
33820	C										
33822	C										
33824	C										
33840	C										
33845	C										
33851	C										
33852	C										
33853	C										
33860	C										
33861	C										
33863	C										
33864	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
33870	C										
33875	C										
33877	C										
33880	C										
33881	C										
33883	C										
33884	C										
33886	C										
33889	C										
33891	C										
33910	C										
33915	C										
33916	C										
33917	C										
33920	C										
33922	C										
33924	C										
33925	C										
33926	C										
33930	C										
33933	C										
33935	C										
33940	C										
33944	C										
33945	C										
33960	C										
33961	C										
33967	C										
33968	C										
33970	C										
33971	C										
33973	C										
33974	C										
33975	C										
33976	C										
33977	C										
33978	C										
33979	C										
33980	C										
33999	T	0070									
34001	C										
34051	C										
34101	T	0088									
34111	T	0088									
34151	C										
34201	T	0088									
34203	T	0088									
34401	C										
34421	T	0088									
34451	C										
34471	T	0088									
34490	T	0088									
34501	T	0088									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
34502	C										
34510	T	0088									
34520	T	0088									
34530	T	0088									
34800	C										
34802	C										
34803	C										
34804	C										
34805	C										
34806	C										
34808	C										
34812	C										
34813	C										
34820	C										
34825	C										
34826	C										
34830	C										
34831	C										
34832	C										
34833	C										
34834	C										
34900	C										
35001	C										
35002	C										
35005	C										
35011	T	0653									
35013	C										
35021	C										
35022	C										
35045	C										
35081	C										
35082	C										
35091	C										
35092	C										
35102	C										
35103	C										
35111	C										
35112	C										
35121	C										
35122	C										
35131	C										
35132	C										
35141	C										
35142	C										
35151	C										
35152	C										
35180	T	0093									
35182	C										
35184	T	0093									
35188	T	0088									
35189	C										
35190	T	0093									
35201	T	0093									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
35206	T	0093									
35207	T	0088									
35211	C										
35216	C										
35221	C										
35226	T	0093									
35231	T	0093									
35236	T	0093									
35241	C										
35246	C										
35251	C										
35256	T	0093									
35261	T	0653									
35266	T	0653									
35271	C										
35276	C										
35281	C										
35286	T	0653									
35301	C										
35302	C										
35303	C										
35304	C										
35305	C										
35306	C										
35311	C										
35321	T	0093									
35331	C										
35341	C										
35351	C										
35355	C										
35361	C										
35363	C										
35371	C										
35372	C										
35390	C										
35400	C										
35450	C										
35452	C										
35454	C										
35456	C										
35458	T	0083									
35459	T	0083									
35460	T	0083									
35470	T	0083									
35471	T	0083									
35472	T	0083									
35473	T	0083									
35474	T	0083									
35475	T	0083									
35476	T	0083									
35480	C										
35481	C										
35482	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
35483	C										
35484	T	0082									
35485	T	0082									
35490	T	0082									
35491	T	0082									
35492	T	0082									
35493	T	0082									
35494	T	0082									
35495	T	0082									
35500	T	0103									
35501	C										
35506	C										
35508	C										
35509	C										
35510	C										
35511	C										
35512	C										
35515	C										
35516	C										
35518	C										
35521	C										
35522	C										
35523	C										
35525	C										
35526	C										
35531	C										
35533	C										
35536	C										
35537	C										
35538	C										
35539	C										
35540	C										
35548	C										
35549	C										
35551	C										
35556	C										
35558	C										
35560	C										
35563	C										
35565	C										
35566	C										
35571	C										
35572	N										
35583	C										
35585	C										
35587	C										
35600	C										
35601	C										
35606	C										
35612	C										
35616	C										
35621	C										
35623	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
35626	C										
35631	C										
35636	C										
35637	C										
35638	C										
35642	C										
35645	C										
35646	C										
35647	C										
35650	C										
35651	C										
35654	C										
35656	C										
35661	C										
35663	C										
35665	C										
35666	C										
35671	C										
35681	C										
35682	C										
35683	C										
35685	T	0093									
35686	T	0093									
35691	C										
35693	C										
35694	C										
35695	C										
35697	C										
35700	C										
35701	C										
35721	C										
35741	C										
35761	T	0115									
35800	C										
35820	C										
35840	C										
35860	T	0093									
35870	C										
35875	T	0088									
35876	T	0088									
35879	T	0088									
35881	T	0088									
35883	T	0088									
35884	T	0088									
35901	C										
35903	T	0115									
35905	C										
35907	C										
36000	N										
36002	S	0267									
36005	N										
36010	N										
36011	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
36012	N										
36013	N										
36014	N										
36015	N										
36100	N										
36120	N										
36140	N										
36145	N										
36160	N										
36200	N										
36215	N										
36216	N										
36217	N										
36218	N										
36245	N										
36246	N										
36247	N										
36248	N										
36260	T	0623									
36261	T	0105									
36262	T	0105									
36299	N										
36400	N										
36405	N										
36406	N										
36410	N										
36415	A										
36416	N										
36420	T	0035									
36425	T	0035									
36430	S	0110									
36440	S	0110									
36450	S	0110									
36455	S	0110									
36460	S	0110									
36468	T	0013									
36469	T	0013									
36470	T	0013									
36471	T	0013									
36475	T	0091									
36476	T	0092									
36478	T	0092									
36479	T	0092									
36481	N										
36500	N										
36510	N										
36511	S	0111									
36512	S	0111									
36513	S	0111									
36514	S	0111									
36515	S	0112									
36516	S	0112									
36522	S	0112									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
36540	D										
36550	D										
36555	T	0621									
36556	T	0621									
36557	T	0622									
36558	T	0622									
36560	T	0623									
36561	T	0623									
36563	T	0623									
36565	T	0623									
36566	T	0625									
36568	T	0621									
36569	T	0621									
36570	T	0622									
36571	T	0622									
36575	T	0109									
36576	T	0621									
36578	T	0622									
36580	T	0621									
36581	T	0622									
36582	T	0623									
36583	T	0623									
36584	T	0621									
36585	T	0622									
36589	T	0109									
36590	T	0621									
36591	Q	0624									
36592	N										
36593	T	0676									
36595	T	0622									
36596	T	0621									
36597	T	0621									
36598	T	0676									
36600	Q	0035									
36620	N										
36625	N										
36640	T	0623									
36660	C										
36680	T	0002									
36800	T	0115									
36810	T	0115									
36815	T	0115									
36818	T	0088									
36819	T	0088									
36820	T	0088									
36821	T	0088									
36822	C										
36823	C										
36825	T	0088									
36830	T	0088									
36831	T	0088									
36832	T	0088									
36833	T	0088									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
36834	T	0088							
36835	T	0115							
36838	T	0088							
36860	T	0676							
36861	T	0115							
36870	T	0653							
37140	C								
37145	C								
37160	C								
37180	C								
37181	C								
37182	C								
37183	T	0229							
37184	T	0088							
37185	T	0088							
37186	T	0088							
37187	T	0088							
37188	T	0088							
37195	T	0676							
37200	T	0623							
37201	T	0103							
37202	T	0103							
37203	T	0623							
37204	T	0082							
37205	T	0229							
37206	T	0229							
37207	T	0229							
37208	T	0229							
37209	T	0623							
37210	T	0229							
37215	C								
37216	E								
37250	N								
37251	N								
37500	T	0091							
37501	T	0092							
37565	T	0093							
37600	T	0093							
37605	T	0091							
37606	T	0092							
37607	T	0092							
37609	T	0021							
37615	T	0092							
37616	C								
37617	C								
37618	C								
37620	T	0091							
37650	T	0092							
37660	C								
37700	T	0092							
37718	T	0092							
37722	T	0091							
37735	T	0091							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
37760	T	0092									
37765	T	0092									
37766	T	0092									
37780	T	0092									
37785	T	0092									
37788	C										
37790	T	0181									
37799	T	0103									
38100	C										
38101	C										
38102	C										
38115	C										
38120	T	0131									
38129	T	0130									
38200	N										
38204	N										
38205	S	0111									
38206	S	0111									
38207	S	0110									
38208	S	0110									
38209	S	0110									
38210	S	0393									
38211	S	0393									
38212	S	0393									
38213	S	0393									
38214	S	0393									
38215	S	0393									
38220	T	0003									
38221	T	0003									
38230	S	0112									
38240	S	0112									
38241	S	0112									
38242	S	0111									
38300	T	0007									
38305	T	0008									
38308	T	0113									
38380	C										
38381	C										
38382	C										
38500	T	0113									
38505	T	0005									
38510	T	0113									
38520	T	0113									
38525	T	0113									
38530	T	0113									
38542	T	0114									
38550	T	0113									
38555	T	0113									
38562	C										
38564	C										
38570	T	0131									
38571	T	0132									
38572	T	0131									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
38589	T	0130									
38700	T	0113									
38720	T	0113									
38724	C										
38740	T	0114									
38745	T	0114									
38746	C										
38747	C										
38760	T	0113									
38765	C										
38770	C										
38780	C										
38790	N										
38792	Q	0392									
38794	N										
38999	S	0110									
39000	C										
39010	C										
39200	C										
39220	C										
39400	T	0069									
39499	C										
39501	C										
39502	C										
39503	C										
39520	C										
39530	C										
39531	C										
39540	C										
39541	C										
39545	C										
39560	C										
39561	C										
39599	C										
4000F	M										
4001F	M										
4002F	M										
4003F	M										
4005F	M										
4006F	M										
4007F	D										
4009F	M										
4011F	M										
4012F	M										
4014F	M										
4015F	M										
4016F	M										
4017F	M										
4018F	M										
4019F	M										
4025F	M										
4030F	M										
4033F	M										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
4035F	M										
4037F	M										
4040F	M										
4041F	M										
4042F	M										
4043F	M										
4044F	M										
4045F	M										
4046F	M										
4047F	M										
4048F	M										
40490	T	0251									
4049F	M										
40500	T	0253									
4050F	M										
40510	T	0254									
4051F	M										
40520	T	0253									
40525	T	0254									
40527	T	0254									
4052F	M										
40530	T	0254									
4053F	M										
4054F	M										
4055F	M										
4056F	M										
4058F	M										
4060F	M										
4062F	M										
4064F	M										
40650	T	0252									
40652	T	0252									
40654	T	0252									
4065F	M										
4066F	M										
4067F	M										
40700	T	0256									
40701	T	0256									
40702	T	0256									
4070F	M										
40720	T	0256									
4073F	M										
4075F	M										
40761	T	0256									
4077F	M										
40799	T	0251									
4079F	M										
40800	T	0006									
40801	T	0252									
40804	X	0340									
40805	T	0252									
40806	T	0251									
40808	T	0251									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
40810	T	0253									
40812	T	0253									
40814	T	0253									
40816	T	0254									
40818	T	0251									
40819	T	0252									
40820	T	0253									
40830	T	0251									
40831	T	0252									
40840	T	0254									
40842	T	0254									
40843	T	0254									
40844	T	0256									
40845	T	0256									
4084F	M										
40899	T	0251									
4090F	M										
4095F	M										
41000	T	0253									
41005	T	0251									
41006	T	0254									
41007	T	0253									
41008	T	0253									
41009	T	0251									
4100F	M										
41010	T	0252									
41015	T	0251									
41016	T	0252									
41017	T	0252									
41018	T	0252									
41019	T	0254									
41100	T	0252									
41105	T	0253									
41108	T	0252									
4110F	M										
41110	T	0253									
41112	T	0253									
41113	T	0253									
41114	T	0254									
41115	T	0252									
41116	T	0253									
41120	T	0254									
41130	C										
41135	C										
41140	C										
41145	C										
41150	C										
41153	C										
41155	C										
4115F	M										
4120F	M										
4124F	M										
41250	T	0251									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
41251	T	0251									
41252	T	0252									
4130F	M										
4131F	M										
4132F	M										
4133F	M										
4134F	M										
4135F	M										
4136F	M										
41500	T	0254									
4150F	M										
41510	T	0253									
4151F	M										
41520	T	0252									
4152F	M										
4153F	M										
4154F	M										
4155F	M										
4156F	M										
4157F	M										
4158F	M										
41599	T	0251									
4159F	M										
4163F	M										
4164F	M										
4165F	M										
4167F	M										
4168F	M										
4169F	M										
4171F	M										
4172F	M										
4174F	M										
4175F	M										
4176F	M										
4177F	M										
4178F	M										
4179F	M										
41800	T	0006									
41805	T	0254									
41806	T	0253									
4180F	M										
4181F	M										
41820	T	0252									
41821	T	0252									
41822	T	0253									
41823	T	0254									
41825	T	0253									
41826	T	0253									
41827	T	0254									
41828	T	0253									
4182F	M										
41830	T	0253									
41850	T	0253									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
4185F	M										
4186F	M										
41870	T	0254									
41872	T	0253									
41874	T	0254									
4187F	M										
4188F	M										
41899	T	0251									
4189F	M										
4190F	M										
4191F	M										
42000	T	0251									
4200F	M										
4201F	M										
42100	T	0252									
42104	T	0253									
42106	T	0253									
42107	T	0254									
4210F	M										
42120	T	0256									
42140	T	0252									
42145	T	0254									
42160	T	0253									
42180	T	0251									
42182	T	0256									
42200	T	0256									
42205	T	0256									
4220F	M										
42210	T	0256									
42215	T	0256									
4221F	M										
42220	T	0256									
42225	T	0256									
42226	T	0256									
42227	T	0256									
42235	T	0253									
42260	T	0254									
42280	T	0251									
42281	T	0253									
42299	T	0251									
42300	T	0253									
42305	T	0253									
4230F	M										
42310	T	0251									
42320	T	0251									
42330	T	0253									
42335	T	0253									
42340	T	0253									
42400	T	0005									
42405	T	0253									
42408	T	0253									
42409	T	0253									
42410	T	0256									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
42415	T	0256									
42420	T	0256									
42425	T	0256									
42426	C										
42440	T	0256									
42450	T	0254									
42500	T	0254									
42505	T	0256									
42507	T	0256									
42508	T	0256									
42509	T	0256									
42510	T	0256									
42550	N										
42600	T	0253									
42650	T	0252									
42660	T	0251									
42665	T	0254									
42699	T	0251									
42700	T	0251									
42720	T	0253									
42725	T	0256									
42800	T	0252									
42802	T	0253									
42804	T	0253									
42806	T	0254									
42808	T	0253									
42809	X	0340									
42810	T	0254									
42815	T	0256									
42820	T	0258									
42821	T	0258									
42825	T	0258									
42826	T	0258									
42830	T	0258									
42831	T	0258									
42835	T	0258									
42836	T	0258									
42842	T	0254									
42844	T	0256									
42845	C										
42860	T	0258									
42870	T	0258									
42890	T	0256									
42892	T	0256									
42894	C										
42900	T	0252									
42950	T	0254									
42953	C										
42955	T	0254									
42960	T	0250									
42961	C										
42962	T	0256									
42970	T	0250									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
42971	C										
42972	T	0253									
42999	T	0251									
43020	T	0252									
43030	T	0253									
43045	C										
43100	C										
43101	C										
43107	C										
43108	C										
43112	C										
43113	C										
43116	C										
43117	C										
43118	C										
43121	C										
43122	C										
43123	C										
43124	C										
43130	T	0256									
43135	C										
43200	T	0141									
43201	T	0141									
43202	T	0141									
43204	T	0141									
43205	T	0141									
43215	T	0141									
43216	T	0141									
43217	T	0141									
43219	T	0384									
43220	T	0141									
43226	T	0141									
43227	T	0141									
43228	T	0422									
43231	T	0141									
43232	T	0141									
43234	T	0141									
43235	T	0141									
43236	T	0141									
43237	T	0141									
43238	T	0141									
43239	T	0141									
43240	T	0141									
43241	T	0141									
43242	T	0141									
43243	T	0141									
43244	T	0141									
43245	T	0141									
43246	T	0141									
43247	T	0141									
43248	T	0141									
43249	T	0141									
43250	T	0141									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
43251	T	0141									
43255	T	0141									
43256	T	0384									
43257	T	0422									
43258	T	0141									
43259	T	0141									
43260	T	0151									
43261	T	0151									
43262	T	0151									
43263	T	0151									
43264	T	0151									
43265	T	0151									
43267	T	0151									
43268	T	0384									
43269	T	0384									
43271	T	0151									
43272	T	0151									
43280	T	0132									
43289	T	0130									
43300	C										
43305	C										
43310	C										
43312	C										
43313	C										
43314	C										
43320	C										
43324	C										
43325	C										
43326	C										
43330	C										
43331	C										
43340	C										
43341	C										
43350	C										
43351	C										
43352	C										
43360	C										
43361	C										
43400	C										
43401	C										
43405	C										
43410	C										
43415	C										
43420	C										
43425	C										
43450	T	0140									
43453	T	0140									
43456	T	0140									
43458	T	0141									
43460	C										
43496	C										
43499	T	0141									
43500	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
43501	C										
43502	C										
43510	T	0141									
43520	C										
43600	T	0141									
43605	C										
43610	C										
43611	C										
43620	C										
43621	C										
43622	C										
43631	C										
43632	C										
43633	C										
43634	C										
43635	C										
43640	C										
43641	C										
43644	C										
43645	C										
43647	S	0061									
43648	T	0130									
43651	T	0132									
43652	T	0132									
43653	T	0131									
43659	T	0130									
43750	D										
43752	X	0272									
43760	T	0121									
43761	T	0141									
43770	C										
43771	C										
43772	C										
43773	C										
43774	C										
43800	C										
43810	C										
43820	C										
43825	C										
43830	T	0422									
43831	T	0141									
43832	C										
43840	C										
43842	E										
43843	C										
43845	C										
43846	C										
43847	C										
43848	C										
43850	C										
43855	C										
43860	C										
43865	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
43870	T	0141									
43880	C										
43881	C										
43882	C										
43886	T	0137									
43887	T	0135									
43888	T	0137									
43999	T	0141									
44005	C										
44010	C										
44015	C										
44020	C										
44021	C										
44025	C										
44050	C										
44055	C										
44100	T	0141									
44110	C										
44111	C										
44120	C										
44121	C										
44125	C										
44126	C										
44127	C										
44128	C										
44130	C										
44132	C										
44133	C										
44135	C										
44136	C										
44137	C										
44139	C										
44140	C										
44141	C										
44143	C										
44144	C										
44145	C										
44146	C										
44147	C										
44150	C										
44151	C										
44155	C										
44156	C										
44157	C										
44158	C										
44160	C										
44180	T	0131									
44186	T	0131									
44187	C										
44188	C										
44202	C										
44203	C										
44204	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
44205	C										
44206	T	0132									
44207	T	0132									
44208	T	0132									
44210	C										
44211	C										
44212	C										
44213	T	0130									
44227	C										
44238	T	0130									
44300	C										
44310	C										
44312	T	0137									
44314	C										
44316	C										
44320	C										
44322	C										
44340	T	0137									
44345	C										
44346	C										
44360	T	0142									
44361	T	0142									
44363	T	0142									
44364	T	0142									
44365	T	0142									
44366	T	0142									
44369	T	0142									
44370	T	0384									
44372	T	0142									
44373	T	0142									
44376	T	0142									
44377	T	0142									
44378	T	0142									
44379	T	0384									
44380	T	0142									
44382	T	0142									
44383	T	0384									
44385	T	0143									
44386	T	0143									
44388	T	0143									
44389	T	0143									
44390	T	0143									
44391	T	0143									
44392	T	0143									
44393	T	0143									
44394	T	0143									
44397	T	0384									
44500	T	0121									
44602	C										
44603	C										
44604	C										
44605	C										
44615	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
44620	C										
44625	C										
44626	C										
44640	C										
44650	C										
44660	C										
44661	C										
44680	C										
44700	C										
44701	N										
44715	C										
44720	C										
44721	C										
44799	T	0153									
44800	C										
44820	C										
44850	C										
44899	C										
44900	C										
44901	T	0037									
44950	C										
44955	C										
44960	C										
44970	T	0131									
44979	T	0130									
45000	T	0155									
45005	T	0155									
45020	T	0155									
45100	T	0149									
45108	T	0149									
45110	C										
45111	C										
45112	C										
45113	C										
45114	C										
45116	C										
45119	C										
45120	C										
45121	C										
45123	C										
45126	C										
45130	C										
45135	C										
45136	C										
45150	T	0149									
45160	T	0149									
45170	T	0149									
45190	T	0149									
45300	T	0146									
45303	T	0147									
45305	T	0147									
45307	T	0428									
45308	T	0147									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
45309	T	0147									
45315	T	0147									
45317	T	0147									
45320	T	0428									
45321	T	0428									
45327	T	0384									
45330	T	0146									
45331	T	0146									
45332	T	0146									
45333	T	0147									
45334	T	0147									
45335	T	0146									
45337	T	0146									
45338	T	0147									
45339	T	0147									
45340	T	0147									
45341	T	0147									
45342	T	0147									
45345	T	0384									
45355	T	0143									
45378	T	0143									
45379	T	0143									
45380	T	0143									
45381	T	0143									
45382	T	0143									
45383	T	0143									
45384	T	0143									
45385	T	0143									
45386	T	0143									
45387	T	0384									
45391	T	0143									
45392	T	0143									
45395	C										
45397	C										
45400	C										
45402	C										
45499	T	0130									
45500	T	0149									
45505	T	0150									
45520	T	0013									
45540	C										
45541	T	0150									
45550	C										
45560	T	0150									
45562	C										
45563	C										
45800	C										
45805	C										
45820	C										
45825	C										
45900	T	0148									
45905	T	0149									
45910	T	0149									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
45915	T	0155									
45990	T	0149									
45999	T	0148									
46020	T	0149									
46030	T	0148									
46040	T	0149									
46045	T	0149									
46050	T	0155									
46060	T	0149									
46070	T	0155									
46080	T	0149									
46083	T	0164									
46200	T	0149									
46210	T	0149									
46211	T	0149									
46220	T	0149									
46221	T	0148									
46230	T	0149									
46250	T	0149									
46255	T	0149									
46257	T	0149									
46258	T	0149									
46260	T	0149									
46261	T	0149									
46262	T	0149									
46270	T	0149									
46275	T	0149									
46280	T	0149									
46285	T	0149									
46288	T	0149									
46320	T	0149									
46500	T	0155									
46505	T	0148									
46600	X	0340									
46604	T	0147									
46606	T	0146									
46608	T	0147									
46610	T	0428									
46611	T	0147									
46612	T	0428									
46614	T	0146									
46615	T	0428									
46700	T	0149									
46705	C										
46706	T	0150									
46710	C										
46712	C										
46715	C										
46716	C										
46730	C										
46735	C										
46740	C										
46742	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
46744	C										
46746	C										
46748	C										
46750	T	0150									
46751	C										
46753	T	0149									
46754	T	0149									
46760	T	0150									
46761	T	0150									
46762	T	0150									
46900	T	0016									
46910	T	0017									
46916	T	0015									
46917	T	0017									
46922	T	0017									
46924	T	0017									
46934	T	0155									
46935	T	0155									
46936	T	0149									
46937	T	0149									
46938	T	0150									
46940	T	0149									
46942	T	0148									
46945	T	0155									
46946	T	0155									
46947	T	0150									
46999	T	0148									
47000	T	0685									
47001	N										
47010	C										
47011	T	0037									
47015	C										
47100	C										
47120	C										
47122	C										
47125	C										
47130	C										
47133	C										
47135	C										
47136	C										
47140	C										
47141	C										
47142	C										
47143	C										
47144	C										
47145	C										
47146	C										
47147	C										
47300	C										
47350	C										
47360	C										
47361	C										
47362	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
47370	T	0132							
47371	T	0131							
47379	T	0130							
47380	C								
47381	C								
47382	T	0423							
47399	T	0004							
47400	C								
47420	C								
47425	C								
47460	C								
47480	C								
47490	T	0152							
47500	N								
47505	N								
47510	T	0152							
47511	T	0152							
47525	T	0427							
47530	T	0427							
47550	C								
47552	T	0152							
47553	T	0152							
47554	T	0152							
47555	T	0152							
47556	T	0152							
47560	T	0130							
47561	T	0130							
47562	T	0131							
47563	T	0131							
47564	T	0131							
47570	C								
47579	T	0130							
47600	C								
47605	C								
47610	C								
47612	C								
47620	C								
47630	T	0152							
47700	C								
47701	C								
47711	C								
47712	C								
47715	C								
47719	D								
47720	C								
47721	C								
47740	C								
47741	C								
47760	C								
47765	C								
47780	C								
47785	C								
47800	C								

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
47801	C										
47802	C										
47900	C										
47999	T	0152									
48000	C										
48001	C										
48020	C										
48100	C										
48102	T	0685									
48105	C										
48120	C										
48140	C										
48145	C										
48146	C										
48148	C										
48150	C										
48152	C										
48153	C										
48154	C										
48155	C										
48160	E										
48400	C										
48500	C										
48510	C										
48511	T	0037									
48520	C										
48540	C										
48545	C										
48547	C										
48548	C										
48550	E										
48551	C										
48552	C										
48554	C										
48556	C										
48999	T	0004									
49000	C										
49002	C										
49010	C										
49020	C										
49021	T	0037									
49040	C										
49041	T	0037									
49060	C										
49061	T	0037									
49062	C										
49080	T	0070									
49081	T	0070									
49180	T	0685									
49200	D										
49201	D										
49203	C										
49204	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
49205	C										
49215	C										
49220	C										
49250	T	0153									
49255	C										
49320	T	0130									
49321	T	0130									
49322	T	0130									
49323	T	0130									
49324	T	0130									
49325	T	0130									
49326	T	0130									
49329	T	0130									
49400	N										
49402	T	0153									
49419	T	0115									
49420	T	0652									
49421	T	0652									
49422	T	0105									
49423	T	0427									
49424	N										
49425	C										
49426	T	0153									
49427	N										
49428	C										
49429	T	0105									
49435	T	0427									
49436	T	0427									
49440	T	0141									
49441	T	0141									
49442	T	0155									
49446	T	0141									
49450	T	0121									
49451	T	0121									
49452	T	0121									
49460	T	0121									
49465	Q	0276									
49491	T	0154									
49492	T	0154									
49495	T	0154									
49496	T	0154									
49500	T	0154									
49501	T	0154									
49505	T	0154									
49507	T	0154									
49520	T	0154									
49521	T	0154									
49525	T	0154									
49540	T	0154									
49550	T	0154									
49553	T	0154									
49555	T	0154									
49557	T	0154									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
49560	T	0154									
49561	T	0154									
49565	T	0154									
49566	T	0154									
49568	T	0154									
49570	T	0154									
49572	T	0154									
49580	T	0154									
49582	T	0154									
49585	T	0154									
49587	T	0154									
49590	T	0154									
49600	T	0154									
49605	C										
49606	C										
49610	C										
49611	C										
49650	T	0131									
49651	T	0131									
49659	T	0130									
49900	C										
49904	C										
49905	C										
49906	C										
49999	T	0153									
50010	C										
50020	T	0162									
50021	T	0037									
50040	C										
50045	C										
5005F	M										
50060	C										
50065	C										
50070	C										
50075	C										
50080	T	0429									
50081	T	0429									
50100	C										
5010F	M										
50120	C										
50125	C										
50130	C										
50135	C										
5015F	M										
50200	T	0685									
50205	C										
5020F	M										
50220	C										
50225	C										
50230	C										
50234	C										
50236	C										
50240	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
50250	C										
50280	C										
50290	C										
50300	C										
50320	C										
50323	C										
50325	C										
50327	C										
50328	C										
50329	C										
50340	C										
50360	C										
50365	C										
50370	C										
50380	C										
50382	T	0162									
50384	T	0161									
50385	T	0161									
50386	T	0160									
50387	T	0427									
50389	T	0160									
50390	T	0685									
50391	T	0126									
50392	T	0161									
50393	T	0162									
50394	N										
50395	T	0161									
50396	T	0164									
50398	T	0427									
50400	C										
50405	C										
50500	C										
5050F	M										
50520	C										
50525	C										
50526	C										
50540	C										
50541	T	0130									
50542	T	0132									
50543	T	0131									
50544	T	0130									
50545	C										
50546	C										
50547	C										
50548	C										
50549	T	0130									
50551	T	0160									
50553	T	0162									
50555	T	0160									
50557	T	0162									
50561	T	0162									
50562	T	0160									
50570	T	0160									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
50572	T	0160							
50574	T	0160							
50575	T	0163							
50576	T	0161							
50580	T	0161							
50590	T	0169							
50592	T	0423							
50593	T	0423							
50600	C								
50605	C								
50610	C								
50620	C								
50630	C								
50650	C								
50660	C								
50684	N								
50686	T	0126							
50688	T	0427							
50690	N								
50700	C								
50715	C								
50722	C								
50725	C								
50727	C								
50728	C								
50740	C								
50750	C								
50760	C								
50770	C								
50780	C								
50782	C								
50783	C								
50785	C								
50800	C								
50810	C								
50815	C								
50820	C								
50825	C								
50830	C								
50840	C								
50845	C								
50860	C								
50900	C								
50920	C								
50930	C								
50940	C								
50945	T	0131							
50947	T	0131							
50948	T	0131							
50949	T	0130							
50951	T	0160							
50953	T	0160							
50955	T	0162							



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
50957	T	0162							
50961	T	0162							
50970	T	0160							
50972	T	0160							
50974	T	0161							
50976	T	0161							
50980	T	0162							
51000	D								
51005	D								
51010	D								
51020	T	0162							
51030	T	0162							
51040	T	0162							
51045	T	0160							
51050	T	0162							
51060	C								
51065	T	0162							
51080	T	0008							
51100	T	0164							
51101	T	0126							
51102	T	0165							
51500	T	0154							
51520	T	0162							
51525	C								
51530	C								
51535	T	0162							
51550	C								
51555	C								
51565	C								
51570	C								
51575	C								
51580	C								
51585	C								
51590	C								
51595	C								
51596	C								
51597	C								
51600	N								
51605	N								
51610	N								
51700	T	0164							
51701	X	0340							
51702	X	0340							
51703	T	0126							
51705	T	0164							
51710	T	0427							
51715	T	0168							
51720	T	0164							
51725	T	0156							
51726	T	0156							
51736	T	0126							
51741	T	0126							
51772	T	0164							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
51784	T	0126									
51785	T	0164									
51792	T	0126									
51795	T	0164									
51797	T	0164									
51798	X	0340									
51800	C										
51820	C										
51840	C										
51841	C										
51845	C										
51860	C										
51865	C										
51880	T	0162									
51900	C										
51920	C										
51925	C										
51940	C										
51960	C										
51980	C										
51990	T	0131									
51992	T	0131									
51999	T	0130									
52000	T	0160									
52001	T	0161									
52005	T	0161									
52007	T	0162									
52010	T	0160									
52204	T	0161									
52214	T	0162									
52224	T	0162									
52234	T	0162									
52235	T	0162									
52240	T	0162									
52250	T	0162									
52260	T	0161									
52265	T	0160									
52270	T	0161									
52275	T	0162									
52276	T	0162									
52277	T	0162									
52281	T	0161									
52282	T	0163									
52283	T	0162									
52285	T	0161									
52290	T	0161									
52300	T	0162									
52301	T	0162									
52305	T	0162									
52310	T	0161									
52315	T	0162									
52317	T	0162									
52318	T	0162									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
52320	T	0162									
52325	T	0162									
52327	T	0162									
52330	T	0162									
52332	T	0162									
52334	T	0162									
52341	T	0162									
52342	T	0162									
52343	T	0162									
52344	T	0162									
52345	T	0162									
52346	T	0162									
52351	T	0162									
52352	T	0162									
52353	T	0163									
52354	T	0162									
52355	T	0162									
52400	T	0162									
52402	T	0162									
52450	T	0162									
52500	T	0162									
52510	D										
52601	T	0163									
52606	T	0162									
52612	T	0163									
52614	T	0163									
52620	T	0163									
52630	T	0163									
52640	T	0162									
52647	T	0429									
52648	T	0429									
52649	T	0429									
52700	T	0162									
53000	T	0166									
53010	T	0166									
53020	T	0166									
53025	T	0166									
53040	T	0166									
53060	T	0166									
53080	T	0166									
53085	T	0166									
53200	T	0166									
53210	T	0168									
53215	T	0166									
53220	T	0168									
53230	T	0168									
53235	T	0166									
53240	T	0168									
53250	T	0166									
53260	T	0166									
53265	T	0166									
53270	T	0166									
53275	T	0166									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
53400	T	0168									
53405	T	0168									
53410	T	0168									
53415	C										
53420	T	0168									
53425	T	0168									
53430	T	0168									
53431	T	0168									
53440	S	0385									
53442	T	0168									
53444	S	0385									
53445	S	0386									
53446	T	0168									
53447	S	0386									
53448	C										
53449	T	0168									
53450	T	0168									
53460	T	0166									
53500	T	0168									
53502	T	0166									
53505	T	0168									
53510	T	0166									
53515	T	0168									
53520	T	0168									
53600	T	0156									
53601	T	0126									
53605	T	0161									
53620	T	0165									
53621	T	0164									
53660	T	0126									
53661	T	0126									
53665	T	0166									
53850	T	0429									
53852	T	0429									
53853	T	0162									
53899	T	0126									
54000	T	0166									
54001	T	0166									
54015	T	0008									
54050	T	0015									
54055	T	0017									
54056	T	0013									
54057	T	0017									
54060	T	0017									
54065	T	0017									
54100	T	0021									
54105	T	0022									
54110	T	0181									
54111	T	0181									
54112	T	0181									
54115	T	0008									
54120	T	0181									
54125	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
54130	C										
54135	C										
54150	T	0183									
54160	T	0183									
54161	T	0183									
54162	T	0183									
54163	T	0183									
54164	T	0183									
54200	T	0164									
54205	T	0181									
54220	T	0164									
54230	N										
54231	T	0165									
54235	T	0164									
54240	T	0126									
54250	T	0164									
54300	T	0181									
54304	T	0181									
54308	T	0181									
54312	T	0181									
54316	T	0181									
54318	T	0181									
54322	T	0181									
54324	T	0181									
54326	T	0181									
54328	T	0181									
54332	C										
54336	C										
54340	T	0181									
54344	T	0181									
54348	T	0181									
54352	T	0181									
54360	T	0181									
54380	T	0181									
54385	T	0181									
54390	C										
54400	S	0385									
54401	S	0386									
54405	S	0386									
54406	T	0181									
54408	T	0181									
54410	S	0386									
54411	C										
54415	T	0181									
54416	S	0386									
54417	C										
54420	T	0181									
54430	C										
54435	T	0181									
54440	T	0181									
54450	T	0156									
54500	T	0037									
54505	T	0183									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
54512	T	0183									
54520	T	0183									
54522	T	0183									
54530	T	0154									
54535	C										
54550	T	0154									
54560	T	0183									
54600	T	0183									
54620	T	0183									
54640	T	0154									
54650	C										
54660	T	0183									
54670	T	0183									
54680	T	0183									
54690	T	0131									
54692	T	0132									
54699	T	0130									
54700	T	0183									
54800	T	0004									
54830	T	0183									
54840	T	0183									
54860	T	0183									
54861	T	0183									
54865	T	0183									
54900	T	0183									
54901	T	0183									
55000	T	0004									
55040	T	0154									
55041	T	0154									
55060	T	0183									
55100	T	0007									
55110	T	0183									
55120	T	0183									
55150	T	0183									
55175	T	0183									
55180	T	0183									
55200	T	0183									
55250	T	0183									
55300	N										
55400	T	0183									
55450	T	0183									
55500	T	0183									
55520	T	0183									
55530	T	0183									
55535	T	0154									
55540	T	0154									
55550	T	0131									
55559	T	0130									
55600	T	0183									
55605	C										
55650	C										
55680	T	0183									
55700	T	0184									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
55705	T	0184									
55720	T	0162									
55725	T	0162									
55801	C										
55810	C										
55812	C										
55815	C										
55821	C										
55831	C										
55840	C										
55842	C										
55845	C										
55860	T	0165									
55862	C										
55865	C										
55866	C										
55870	T	0189									
55873	T	0674									
55875	Q	0163									
55876	T	0156									
55899	T	0126									
55920	T	0153									
55970	E										
55980	E										
56405	T	0189									
56420	T	0188									
56440	T	0193									
56441	T	0193									
56442	T	0193									
56501	T	0017									
56515	T	0017									
56605	T	0189									
56606	T	0188									
56620	T	0193									
56625	T	0193									
56630	C										
56631	C										
56632	C										
56633	C										
56634	C										
56637	C										
56640	C										
56700	T	0193									
56740	T	0193									
56800	T	0193									
56805	T	0193									
56810	T	0193									
56820	T	0188									
56821	T	0188									
57000	T	0193									
57010	T	0193									
57020	T	0192									
57022	T	0007									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
57023	T	0008									
57061	T	0193									
57065	T	0193									
57100	T	0192									
57105	T	0193									
57106	T	0193									
57107	T	0195									
57109	T	0195									
57110	C										
57111	C										
57112	C										
57120	T	0195									
57130	T	0193									
57135	T	0193									
57150	T	0188									
57155	T	0192									
57160	T	0188									
57170	T	0191									
57180	T	0188									
57200	T	0193									
57210	T	0193									
57220	T	0202									
57230	T	0195									
57240	T	0195									
57250	T	0195									
57260	T	0195									
57265	T	0202									
57267	T	0195									
57268	T	0195									
57270	C										
57280	C										
57282	T	0202									
57283	T	0202									
57284	T	0202									
57285	T	0195									
57287	T	0195									
57288	T	0202									
57289	T	0195									
57291	T	0195									
57292	T	0195									
57295	T	0193									
57296	C										
57300	T	0195									
57305	C										
57307	C										
57308	C										
57310	T	0202									
57311	C										
57320	T	0195									
57330	T	0195									
57335	T	0195									
57400	T	0193									
57410	T	0193									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS										
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.										
These conversion relationships are effective beginning December 1, 2008.										
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.										
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.										
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .										
HCPCS Code	SI	APC								
57415	T	0193								
57420	T	0189								
57421	T	0189								
57423	T	0202								
57425	T	0130								
57452	T	0189								
57454	T	0189								
57455	T	0189								
57456	T	0189								
57460	T	0193								
57461	T	0193								
57500	T	0192								
57505	T	0192								
57510	T	0193								
57511	T	0188								
57513	T	0193								
57520	T	0193								
57522	T	0193								
57530	T	0195								
57531	C									
57540	C									
57545	C									
57550	T	0195								
57555	T	0195								
57556	T	0202								
57558	T	0193								
57700	T	0193								
57720	T	0193								
57800	T	0193								
58100	T	0188								
58110	N									
58120	T	0193								
58140	C									
58145	T	0195								
58146	C									
58150	C									
58152	C									
58180	C									
58200	C									
58210	C									
58240	C									
58260	T	0195								
58262	T	0195								
58263	T	0195								
58267	C									
58270	T	0195								
58275	C									
58280	C									
58285	C									
58290	T	0202								
58291	T	0202								
58292	T	0202								
58293	C									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
58294	T	0202									
58300	E										
58301	T	0188									
58321	T	0189									
58322	T	0189									
58323	T	0189									
58340	N										
58345	T	0193									
58346	T	0193									
58350	T	0195									
58353	T	0195									
58356	T	0202									
58400	C										
58410	C										
58520	C										
58540	C										
58541	T	0131									
58542	T	0131									
58543	T	0131									
58544	T	0131									
58545	T	0130									
58546	T	0131									
58548	C										
58550	T	0132									
58552	T	0131									
58553	T	0131									
58554	T	0131									
58555	T	0190									
58558	T	0190									
58559	T	0190									
58560	T	0387									
58561	T	0387									
58562	T	0190									
58563	T	0387									
58565	T	0202									
58570	T	0131									
58571	T	0131									
58572	T	0131									
58573	T	0131									
58578	T	0130									
58579	T	0190									
58600	T	0195									
58605	C										
58611	C										
58615	T	0193									
58660	T	0131									
58661	T	0131									
58662	T	0131									
58670	T	0131									
58671	T	0131									
58672	T	0131									
58673	T	0131									
58679	T	0130									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
58700	C										
58720	C										
58740	C										
58750	C										
58752	C										
58760	C										
58770	T	0195									
58800	T	0193									
58805	T	0195									
58820	T	0195									
58822	C										
58823	T	0193									
58825	C										
58900	T	0193									
58920	T	0195									
58925	T	0195									
58940	C										
58943	C										
58950	C										
58951	C										
58952	C										
58953	C										
58954	C										
58956	C										
58957	C										
58958	C										
58960	C										
58970	T	0189									
58974	T	0189									
58976	T	0189									
58999	T	0191									
59000	T	0189									
59001	T	0192									
59012	T	0189									
59015	T	0189									
59020	T	0188									
59025	T	0188									
59030	T	0189									
59050	M										
59051	B										
59070	T	0189									
59072	T	0189									
59074	T	0189									
59076	T	0189									
59100	T	0195									
59120	C										
59121	C										
59130	C										
59135	C										
59136	C										
59140	C										
59150	T	0131									
59151	T	0131									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
59160	T	0193							
59200	T	0189							
59300	T	0193							
59320	T	0193							
59325	C								
59350	C								
59400	B								
59409	T	0193							
59410	B								
59412	T	0193							
59414	T	0193							
59425	B								
59426	B								
59430	B								
59510	B								
59514	C								
59515	B								
59525	C								
59610	B								
59612	T	0193							
59614	B								
59618	B								
59620	C								
59622	B								
59812	T	0193							
59820	T	0193							
59821	T	0193							
59830	C								
59840	T	0193							
59841	T	0193							
59850	C								
59851	C								
59852	C								
59855	C								
59856	C								
59857	C								
59866	T	0189							
59870	T	0193							
59871	T	0193							
59897	T	0189							
59898	T	0130							
59899	T	0191							
60000	T	0252							
60001	D								
6005F	M								
60100	T	0004							
6010F	M								
6015F	M								
60200	T	0114							
6020F	M								
60210	T	0114							
60212	T	0114							
60220	T	0114							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
60225	T	0114									
60240	T	0114									
60252	T	0256									
60254	C										
60260	T	0256									
60270	C										
60271	T	0256									
60280	T	0114									
60281	T	0114									
60300	T	0004									
6030F	M										
60500	T	0256									
60502	T	0256									
60505	C										
60512	T	0022									
60520	T	0256									
60521	C										
60522	C										
60540	C										
60545	C										
60600	C										
60605	C										
60650	C										
60659	T	0130									
60699	T	0114									
61000	T	0212									
61001	T	0212									
61020	T	0212									
61026	T	0212									
61050	T	0212									
61055	T	0212									
61070	T	0121									
61105	C										
61107	C										
61108	C										
61120	C										
61140	C										
61150	C										
61151	C										
61154	C										
61156	C										
61210	C										
61215	T	0224									
61250	C										
61253	C										
61304	C										
61305	C										
61312	C										
61313	C										
61314	C										
61315	C										
61316	C										
61320	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
61321	C										
61322	C										
61323	C										
61330	T	0256									
61332	C										
61333	C										
61334	T	0256									
61340	C										
61343	C										
61345	C										
61440	C										
61450	C										
61458	C										
61460	C										
61470	C										
61480	C										
61490	C										
61500	C										
61501	C										
61510	C										
61512	C										
61514	C										
61516	C										
61517	C										
61518	C										
61519	C										
61520	C										
61521	C										
61522	C										
61524	C										
61526	C										
61530	C										
61531	C										
61533	C										
61534	C										
61535	C										
61536	C										
61537	C										
61538	C										
61539	C										
61540	C										
61541	C										
61542	C										
61543	C										
61544	C										
61545	C										
61546	C										
61548	C										
61550	C										
61552	C										
61556	C										
61557	C										
61558	C										

<b>(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS</b>											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
61559	C										
61563	C										
61564	C										
61566	C										
61567	C										
61570	C										
61571	C										
61575	C										
61576	C										
61580	C										
61581	C										
61582	C										
61583	C										
61584	C										
61585	C										
61586	C										
61590	C										
61591	C										
61592	C										
61595	C										
61596	C										
61597	C										
61598	C										
61600	C										
61601	C										
61605	C										
61606	C										
61607	C										
61608	C										
61609	C										
61610	C										
61611	C										
61612	C										
61613	C										
61615	C										
61616	C										
61618	C										
61619	C										
61623	T	0082									
61624	C										
61626	T	0082									
61630	E										
61635	E										
61640	E										
61641	E										
61642	E										
61680	C										
61682	C										
61684	C										
61686	C										
61690	C										
61692	C										
61697	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
61698	C										
61700	C										
61702	C										
61703	C										
61705	C										
61708	C										
61710	C										
61711	C										
61720	T	0221									
61735	C										
61750	C										
61751	C										
61760	C										
61770	T	0221									
61790	T	0220									
61791	T	0203									
61793	B										
61795	N										
61850	C										
61860	C										
61863	C										
61864	C										
61867	C										
61868	C										
61870	C										
61875	C										
61880	T	0687									
61885	S	0039									
61886	S	0315									
61888	T	0688									
62000	T	0254									
62005	C										
62010	C										
62100	C										
62115	C										
62116	C										
62117	C										
62120	C										
62121	C										
62140	C										
62141	C										
62142	C										
62143	C										
62145	C										
62146	C										
62147	C										
62148	C										
62160	N										
62161	C										
62162	C										
62163	C										
62164	C										
62165	C										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
62180	C										
62190	C										
62192	C										
62194	T	0212									
62200	C										
62201	C										
62220	C										
62223	C										
62225	T	0427									
62230	T	0224									
62252	S	0691									
62256	C										
62258	C										
62263	T	0203									
62264	T	0203									
62268	T	0212									
62269	T	0685									
62270	T	0206									
62272	T	0206									
62273	T	0206									
62280	T	0207									
62281	T	0207									
62282	T	0207									
62284	N										
62287	T	0221									
62290	N										
62291	N										
62292	T	0212									
62294	T	0212									
62310	T	0207									
62311	T	0207									
62318	T	0207									
62319	T	0207									
62350	T	0224									
62351	T	0208									
62355	T	0203									
62360	T	0224									
62361	T	0227									
62362	T	0227									
62365	T	0221									
62367	S	0691									
62368	S	0691									
63001	T	0208									
63003	T	0208									
63005	T	0208									
63011	T	0208									
63012	T	0208									
63015	T	0208									
63016	T	0208									
63017	T	0208									
63020	T	0208									
63030	T	0208									
63035	T	0208									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
63040	T	0208									
63042	T	0208									
63043	C										
63044	C										
63045	T	0208									
63046	T	0208									
63047	T	0208									
63048	T	0208									
63050	C										
63051	C										
63055	T	0208									
63056	T	0208									
63057	T	0208									
63064	T	0208									
63066	T	0208									
63075	T	0208									
63076	C										
63077	C										
63078	C										
63081	C										
63082	C										
63085	C										
63086	C										
63087	C										
63088	C										
63090	C										
63091	C										
63101	C										
63102	C										
63103	C										
63170	C										
63172	C										
63173	C										
63180	C										
63182	C										
63185	C										
63190	C										
63191	C										
63194	C										
63195	C										
63196	C										
63197	C										
63198	C										
63199	C										
63200	C										
63250	C										
63251	C										
63252	C										
63265	C										
63266	C										
63267	C										
63268	C										
63270	C										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
63271	C								
63272	C								
63273	C								
63275	C								
63276	C								
63277	C								
63278	C								
63280	C								
63281	C								
63282	C								
63283	C								
63285	C								
63286	C								
63287	C								
63290	C								
63295	C								
63300	C								
63301	C								
63302	C								
63303	C								
63304	C								
63305	C								
63306	C								
63307	C								
63308	C								
63600	T	0220							
63610	T	0220							
63615	T	0220							
63650	S	0040							
63655	S	0061							
63660	T	0687							
63685	S	0222							
63688	T	0688							
63700	C								
63702	C								
63704	C								
63706	C								
63707	C								
63709	C								
63710	C								
63740	C								
63741	T	0224							
63744	T	0224							
63746	T	0109							
64400	T	0204							
64402	T	0204							
64405	T	0206							
64408	T	0206							
64410	T	0207							
64412	T	0207							
64413	T	0206							
64415	T	0206							
64416	T	0207							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS										
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.										
These conversion relationships are effective beginning December 1, 2008.										
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.										
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.										
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .										
HCPCS Code	SI	APC								
64417	T	0206								
64418	T	0206								
64420	T	0206								
64421	T	0206								
64425	T	0206								
64430	T	0207								
64435	T	0206								
64445	T	0206								
64446	T	0203								
64447	T	0206								
64448	T	0206								
64449	T	0207								
64450	T	0206								
64470	T	0207								
64472	T	0206								
64475	T	0207								
64476	T	0204								
64479	T	0207								
64480	T	0206								
64483	T	0207								
64484	T	0206								
64505	T	0204								
64508	T	0204								
64510	T	0207								
64517	T	0207								
64520	T	0207								
64530	T	0207								
64550	A									
64553	S	0225								
64555	S	0040								
64560	S	0040								
64561	S	0040								
64565	S	0040								
64573	S	0225								
64575	S	0061								
64577	S	0061								
64580	S	0061								
64581	S	0061								
64585	T	0687								
64590	S	0039								
64595	T	0688								
64600	T	0203								
64605	T	0203								
64610	T	0203								
64612	T	0204								
64613	T	0204								
64614	T	0204								
64620	T	0207								
64622	T	0203								
64623	T	0207								
64626	T	0203								
64627	T	0204								
64630	T	0207								

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
64640	T	0207									
64650	T	0204									
64653	T	0204									
64680	T	0203									
64681	T	0203									
64702	T	0220									
64704	T	0220									
64708	T	0220									
64712	T	0220									
64713	T	0220									
64714	T	0220									
64716	T	0220									
64718	T	0220									
64719	T	0220									
64721	T	0220									
64722	T	0220									
64726	T	0220									
64727	T	0220									
64732	T	0220									
64734	T	0220									
64736	T	0220									
64738	T	0220									
64740	T	0220									
64742	T	0220									
64744	T	0220									
64746	T	0220									
64752	C										
64755	C										
64760	C										
64761	T	0220									
64763	T	0220									
64766	T	0221									
64771	T	0220									
64772	T	0220									
64774	T	0220									
64776	T	0220									
64778	T	0220									
64782	T	0220									
64783	T	0220									
64784	T	0220									
64786	T	0221									
64787	T	0220									
64788	T	0220									
64790	T	0220									
64792	T	0221									
64795	T	0220									
64802	T	0220									
64804	T	0220									
64809	C										
64818	C										
64820	T	0220									
64821	T	0054									
64822	T	0054									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
64823	T	0054									
64831	T	0221									
64832	T	0221									
64834	T	0221									
64835	T	0221									
64836	T	0221									
64837	T	0221									
64840	T	0221									
64856	T	0221									
64857	T	0221									
64858	T	0221									
64859	T	0221									
64861	T	0221									
64862	T	0221									
64864	T	0221									
64865	T	0221									
64866	C										
64868	C										
64870	T	0221									
64872	T	0221									
64874	T	0221									
64876	T	0221									
64885	T	0221									
64886	T	0221									
64890	T	0221									
64891	T	0221									
64892	T	0221									
64893	T	0221									
64895	T	0221									
64896	T	0221									
64897	T	0221									
64898	T	0221									
64901	T	0221									
64902	T	0221									
64905	T	0221									
64907	T	0221									
64910	T	0220									
64911	T	0220									
64999	T	0204									
65091	T	0242									
65093	T	0242									
65101	T	0242									
65103	T	0242									
65105	T	0242									
65110	T	0242									
65112	T	0242									
65114	T	0242									
65125	T	0240									
65130	T	0241									
65135	T	0241									
65140	T	0242									
65150	T	0241									
65155	T	0242									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
65175	T	0240									
65205	S	0698									
65210	S	0698									
65220	S	0698									
65222	S	0698									
65235	T	0233									
65260	T	0236									
65265	T	0237									
65270	T	0240									
65272	T	0234									
65273	C										
65275	T	0234									
65280	T	0236									
65285	T	0672									
65286	T	0232									
65290	T	0243									
65400	T	0233									
65410	T	0233									
65420	T	0233									
65426	T	0234									
65430	S	0698									
65435	T	0239									
65436	T	0233									
65450	S	0231									
65600	T	0240									
65710	T	0244									
65730	T	0244									
65750	T	0244									
65755	T	0244									
65760	E										
65765	E										
65767	E										
65770	T	0293									
65771	E										
65772	T	0233									
65775	T	0233									
65780	T	0244									
65781	T	0244									
65782	T	0244									
65800	T	0233									
65805	T	0233									
65810	T	0234									
65815	T	0234									
65820	T	0232									
65850	T	0234									
65855	T	0247									
65860	T	0247									
65865	T	0233									
65870	T	0234									
65875	T	0234									
65880	T	0233									
65900	T	0233									
65920	T	0234									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
65930	T	0234									
66020	T	0233									
66030	T	0232									
66130	T	0234									
66150	T	0234									
66155	T	0234									
66160	T	0234									
66165	T	0234									
66170	T	0234									
66172	T	0234									
66180	T	0673									
66185	T	0673									
66220	T	0672									
66225	T	0673									
66250	T	0233									
66500	T	0232									
66505	T	0232									
66600	T	0234									
66605	T	0234									
66625	T	0232									
66630	T	0234									
66635	T	0234									
66680	T	0234									
66682	T	0234									
66700	T	0233									
66710	T	0233									
66711	T	0233									
66720	T	0233									
66740	T	0234									
66761	T	0247									
66762	T	0247									
66770	T	0247									
66820	T	0232									
66821	T	0247									
66825	T	0234									
66830	T	0232									
66840	T	0245									
66850	T	0249									
66852	T	0249									
66920	T	0249									
66930	T	0249									
66940	T	0245									
66982	T	0246									
66983	T	0246									
66984	T	0246									
66985	T	0246									
66986	T	0246									
66990	N										
66999	T	0232									
67005	T	0237									
67010	T	0237									
67015	T	0237									
67025	T	0237									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
67027	T	0672									
67028	S	0231									
67030	T	0236									
67031	T	0247									
67036	T	0672									
67038	D										
67039	T	0672									
67040	T	0672									
67041	T	0672									
67042	T	0672									
67043	T	0672									
67101	T	0236									
67105	T	0247									
67107	T	0672									
67108	T	0672									
67110	T	0236									
67112	T	0672									
67113	T	0672									
67115	T	0236									
67120	T	0236									
67121	T	0237									
67141	T	0235									
67145	T	0247									
67208	T	0236									
67210	T	0247									
67218	T	0236									
67220	T	0235									
67221	T	0235									
67225	T	0235									
67227	T	0237									
67228	T	0247									
67229	T	0247									
67250	T	0240									
67255	T	0237									
67299	T	0235									
67311	T	0243									
67312	T	0243									
67314	T	0243									
67316	T	0243									
67318	T	0243									
67320	T	0243									
67331	T	0243									
67332	T	0243									
67334	T	0243									
67335	T	0243									
67340	T	0243									
67343	T	0243									
67345	T	0238									
67346	T	0699									
67399	T	0243									
67400	T	0241									
67405	T	0241									
67412	T	0241									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
67413	T	0241									
67414	T	0242									
67415	T	0240									
67420	T	0242									
67430	T	0242									
67440	T	0242									
67445	T	0242									
67450	T	0242									
67500	S	0231									
67505	T	0238									
67515	T	0238									
67550	T	0242									
67560	T	0241									
67570	T	0242									
67599	T	0238									
67700	T	0238									
67710	T	0239									
67715	T	0240									
67800	T	0238									
67801	T	0239									
67805	T	0238									
67808	T	0240									
67810	T	0238									
67820	S	0698									
67825	T	0238									
67830	T	0239									
67835	T	0240									
67840	T	0239									
67850	T	0239									
67875	T	0239									
67880	T	0233									
67882	T	0240									
67900	T	0240									
67901	T	0240									
67902	T	0240									
67903	T	0240									
67904	T	0240									
67906	T	0240									
67908	T	0240									
67909	T	0240									
67911	T	0240									
67912	T	0240									
67914	T	0240									
67915	T	0240									
67916	T	0240									
67917	T	0240									
67921	T	0240									
67922	T	0240									
67923	T	0240									
67924	T	0240									
67930	T	0240									
67935	T	0240									
67938	S	0231									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
67950	T	0240									
67961	T	0240									
67966	T	0240									
67971	T	0241									
67973	T	0241									
67974	T	0241									
67975	T	0240									
67999	T	0238									
68020	T	0240									
68040	S	0698									
68100	T	0232									
68110	T	0699									
68115	T	0240									
68130	T	0233									
68135	T	0239									
68200	S	0698									
68320	T	0240									
68325	T	0241									
68326	T	0241									
68328	T	0241									
68330	T	0234									
68335	T	0241									
68340	T	0240									
68360	T	0234									
68362	T	0234									
68371	T	0233									
68399	T	0238									
68400	T	0238									
68420	T	0240									
68440	T	0238									
68500	T	0241									
68505	T	0241									
68510	T	0240									
68520	T	0241									
68525	T	0240									
68530	T	0240									
68540	T	0241									
68550	T	0241									
68700	T	0241									
68705	T	0238									
68720	T	0241									
68745	T	0241									
68750	T	0241									
68760	S	0231									
68761	S	0231									
68770	T	0240									
68801	S	0698									
68810	S	0231									
68811	T	0240									
68815	T	0240									
68816	T	0240									
68840	S	0231									
68850	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
68899	T	0238									
69000	T	0006									
69005	T	0008									
69020	T	0006									
69090	E										
69100	T	0251									
69105	T	0253									
69110	T	0021									
69120	T	0254									
69140	T	0254									
69145	T	0021									
69150	T	0252									
69155	C										
69200	X	0340									
69205	T	0022									
69210	X	0340									
69220	T	0013									
69222	T	0253									
69300	T	0254									
69310	T	0256									
69320	T	0256									
69399	T	0251									
69400	T	0251									
69401	T	0251									
69405	T	0252									
69420	T	0251									
69421	T	0253									
69424	T	0253									
69433	T	0252									
69436	T	0253									
69440	T	0254									
69450	T	0256									
69501	T	0256									
69502	T	0254									
69505	T	0256									
69511	T	0256									
69530	T	0256									
69535	C										
69540	T	0253									
69550	T	0256									
69552	T	0256									
69554	C										
69601	T	0256									
69602	T	0256									
69603	T	0256									
69604	T	0256									
69605	T	0256									
69610	T	0254									
69620	T	0254									
69631	T	0256									
69632	T	0256									
69633	T	0256									
69635	T	0256									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
69636	T	0256									
69637	T	0256									
69641	T	0256									
69642	T	0256									
69643	T	0256									
69644	T	0256									
69645	T	0256									
69646	T	0256									
69650	T	0254									
69660	T	0256									
69661	T	0256									
69662	T	0256									
69666	T	0256									
69667	T	0256									
69670	T	0256									
69676	T	0256									
69700	T	0256									
69710	E										
69711	T	0256									
69714	T	0256									
69715	T	0256									
69717	T	0256									
69718	T	0256									
69720	T	0256									
69725	T	0256									
69740	T	0256									
69745	T	0256									
69799	T	0251									
69801	T	0256									
69802	T	0256									
69805	T	0256									
69806	T	0256									
69820	T	0256									
69840	T	0256									
69905	T	0256									
69910	T	0256									
69915	T	0256									
69930	T	0259									
69949	T	0251									
69950	C										
69955	T	0256									
69960	T	0256									
69970	T	0256									
69979	T	0251									
69990	N										
70010	Q	0274									
70015	Q	0274									
70030	X	0260									
70100	X	0260									
7010F	M										
70110	X	0260									
70120	X	0260									
70130	X	0260									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
70134	X	0261									
70140	X	0260									
70150	X	0260									
70160	X	0260									
70170	Q	0317									
70190	X	0260									
70200	X	0260									
70210	X	0260									
70220	X	0260									
70240	X	0260									
70250	X	0260									
70260	X	0261									
70300	X	0262									
70310	X	0262									
70320	X	0262									
70328	X	0260									
70330	X	0260									
70332	Q	0275									
70336	S	0335									
70350	X	0260									
70355	X	0260									
70360	X	0260									
70370	X	0272									
70371	X	0272									
70373	Q	0263									
70380	X	0260									
70390	Q	0263									
70450	S	0332									
70460	S	0283									
70470	S	0333									
70480	S	0332									
70481	S	0283									
70482	S	0333									
70486	S	0332									
70487	S	0283									
70488	S	0333									
70490	S	0332									
70491	S	0283									
70492	S	0333									
70496	S	0662									
70498	S	0662									
70540	S	0336									
70542	S	0284									
70543	S	0337									
70544	S	0336									
70545	S	0284									
70546	S	0337									
70547	S	0336									
70548	S	0284									
70549	S	0337									
70551	S	0336									
70552	S	0284									
70553	S	0337									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
70554	S	0336									
70555	S	0336									
70557	S	0336									
70558	S	0284									
70559	S	0337									
71010	X	0260									
71015	X	0260									
71020	X	0260									
71021	X	0260									
71022	X	0260									
71023	X	0272									
71030	X	0260									
71034	X	0272									
71035	X	0260									
71040	Q	0263									
71060	Q	0317									
71090	N										
71100	X	0260									
71101	X	0260									
71110	X	0260									
71111	X	0261									
71120	X	0260									
71130	X	0260									
71250	S	0332									
71260	S	0283									
71270	S	0333									
71275	S	0662									
71550	S	0336									
71551	S	0284									
71552	S	0337									
71555	B										
72010	X	0260									
72020	X	0260									
72040	X	0260									
72050	X	0261									
72052	X	0261									
72069	X	0260									
72070	X	0260									
72072	X	0260									
72074	X	0260									
72080	X	0260									
72090	X	0261									
72100	X	0260									
72110	X	0261									
72114	X	0261									
72120	X	0261									
72125	S	0332									
72126	S	0283									
72127	S	0333									
72128	S	0332									
72129	S	0283									
72130	S	0333									
72131	S	0332									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
72132	S	0283									
72133	S	0333									
72141	S	0336									
72142	S	0284									
72146	S	0336									
72147	S	0284									
72148	S	0336									
72149	S	0284									
72156	S	0337									
72157	S	0337									
72158	S	0337									
72159	E										
72170	X	0260									
72190	X	0260									
72191	S	0662									
72192	S	0332									
72193	S	0283									
72194	S	0333									
72195	S	0336									
72196	S	0284									
72197	S	0337									
72198	B										
72200	X	0260									
72202	X	0260									
72220	X	0260									
72240	Q	0274									
72255	Q	0274									
72265	Q	0274									
72270	Q	0274									
72275	N										
72285	Q	0388									
72291	N										
72292	N										
72295	Q	0388									
73000	X	0260									
73010	X	0260									
73020	X	0260									
73030	X	0260									
73040	Q	0275									
73050	X	0260									
73060	X	0260									
73070	X	0260									
73080	X	0260									
73085	Q	0275									
73090	X	0260									
73092	X	0260									
73100	X	0260									
73110	X	0260									
73115	Q	0275									
73120	X	0260									
73130	X	0260									
73140	X	0260									
73200	S	0332									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
73201	S	0283							
73202	S	0333							
73206	S	0662							
73218	S	0336							
73219	S	0284							
73220	S	0337							
73221	S	0336							
73222	S	0284							
73223	S	0337							
73225	E								
73500	X	0260							
73510	X	0260							
73520	X	0261							
73525	Q	0275							
73530	N								
73540	X	0260							
73542	Q	0275							
73550	X	0260							
73560	X	0260							
73562	X	0260							
73564	X	0260							
73565	X	0260							
73580	Q	0275							
73590	X	0260							
73592	X	0260							
73600	X	0260							
73610	X	0260							
73615	Q	0275							
73620	X	0260							
73630	X	0260							
73650	X	0260							
73660	X	0260							
73700	S	0332							
73701	S	0283							
73702	S	0333							
73706	S	0662							
73718	S	0336							
73719	S	0284							
73720	S	0337							
73721	S	0336							
73722	S	0284							
73723	S	0337							
73725	B								
74000	X	0260							
74010	X	0260							
74020	X	0260							
74022	X	0261							
74150	S	0332							
74160	S	0283							
74170	S	0333							
74175	S	0662							
74181	S	0336							
74182	S	0284							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
74183	S	0337									
74185	B										
74190	Q	0317									
74210	S	0276									
74220	S	0276									
74230	S	0276									
74235	N										
74240	S	0276									
74241	S	0276									
74245	S	0277									
74246	S	0276									
74247	S	0276									
74249	S	0277									
74250	S	0276									
74251	S	0277									
74260	S	0276									
74270	S	0276									
74280	S	0277									
74283	S	0276									
74290	S	0276									
74291	S	0276									
74300	N										
74301	N										
74305	N										
74320	Q	0317									
74327	N										
74328	N										
74329	N										
74330	N										
74340	N										
74350	D										
74355	N										
74360	N										
74363	N										
74400	S	0278									
74410	S	0278									
74415	S	0278									
74420	S	0278									
74425	Q	0278									
74430	Q	0278									
74440	Q	0278									
74445	Q	0278									
74450	Q	0278									
74455	Q	0278									
74470	Q	0263									
74475	Q	0317									
74480	Q	0317									
74485	Q	0317									
74710	X	0261									
74740	Q	0263									
74742	N										
74775	S	0278									
75552	D										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
75553	D										
75554	D										
75555	D										
75556	D										
75557	S	0336									
75558	E										
75559	S	0336									
75560	E										
75561	S	0337									
75562	E										
75563	S	0337									
75564	E										
75600	Q	0279									
75605	Q	0279									
75625	Q	0279									
75630	Q	0279									
75635	Q	0662									
75650	Q	0280									
75658	Q	0279									
75660	Q	0280									
75662	Q	0280									
75665	Q	0279									
75671	Q	0280									
75676	Q	0279									
75680	Q	0279									
75685	Q	0279									
75705	Q	0279									
75710	Q	0279									
75716	Q	0279									
75722	Q	0279									
75724	Q	0279									
75726	Q	0279									
75731	Q	0279									
75733	Q	0279									
75736	Q	0279									
75741	Q	0279									
75743	Q	0279									
75746	Q	0668									
75756	Q	0668									
75774	N										
75790	Q	0668									
75801	Q	0317									
75803	Q	0317									
75805	Q	0317									
75807	Q	0317									
75809	Q	0263									
75810	Q	0279									
75820	Q	0668									
75822	Q	0668									
75825	Q	0279									
75827	Q	0668									
75831	Q	0279									
75833	Q	0279									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
75840	Q	0279									
75842	Q	0279									
75860	Q	0668									
75870	Q	0668									
75872	Q	0668									
75880	Q	0668									
75885	Q	0279									
75887	Q	0668									
75889	Q	0279									
75891	Q	0279									
75893	Q	0279									
75894	N										
75896	N										
75898	Q	0263									
75900	C										
75901	N										
75902	N										
75940	N										
75945	Q	0267									
75946	N										
75952	C										
75953	C										
75954	C										
75956	C										
75957	C										
75958	C										
75959	C										
75960	N										
75961	N										
75962	Q	0083									
75964	N										
75966	Q	0083									
75968	N										
75970	N										
75978	Q	0083									
75980	N										
75982	N										
75984	N										
75989	N										
75992	N										
75993	N										
75994	N										
75995	N										
75996	N										
76000	Q	0272									
76001	N										
76010	X	0260									
76080	Q	0263									
76098	X	0260									
76100	X	0261									
76101	X	0263									
76102	X	0263									
76120	X	0272									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
76125	N										
76140	E										
76150	X	0260									
76350	N										
76376	N										
76377	N										
76380	S	0282									
76390	E										
76496	X	0272									
76497	S	0282									
76498	S	0335									
76499	X	0260									
76506	S	0265									
76510	T	0232									
76511	S	0266									
76512	S	0266									
76513	S	0266									
76514	S	0230									
76516	S	0265									
76519	S	0266									
76529	S	0265									
76536	S	0266									
76604	S	0265									
76645	S	0265									
76700	S	0266									
76705	S	0266									
76770	S	0266									
76775	S	0266									
76776	S	0266									
76800	S	0266									
76801	S	0266									
76802	S	0265									
76805	S	0266									
76810	S	0266									
76811	S	0267									
76812	S	0265									
76813	S	0266									
76814	S	0265									
76815	S	0265									
76816	S	0265									
76817	S	0265									
76818	S	0266									
76819	S	0266									
76820	S	0096									
76821	S	0096									
76825	S	0266									
76826	S	0265									
76827	S	0265									
76828	S	0265									
76830	S	0266									
76831	S	0267									
76856	S	0266									
76857	S	0265									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
76870	S	0266									
76872	S	0266									
76873	S	0266									
76880	S	0266									
76885	S	0265									
76886	S	0265									
76930	N										
76932	N										
76936	N										
76937	N										
76940	N										
76941	N										
76942	N										
76945	N										
76946	N										
76948	N										
76950	N										
76965	N										
76970	S	0265									
76975	Q	0267									
76977	X	0340									
76998	N										
76999	S	0265									
77001	N										
77002	N										
77003	N										
77011	N										
77012	N										
77013	N										
77014	N										
77021	N										
77022	N										
77031	N										
77032	N										
77051	A										
77052	A										
77053	Q	0263									
77054	Q	0263									
77055	A										
77056	A										
77057	A										
77058	B										
77059	B										
77071	X	0260									
77072	X	0260									
77073	X	0260									
77074	X	0261									
77075	X	0261									
77076	X	0260									
77077	X	0260									
77078	S	0288									
77079	S	0282									
77080	S	0288									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
77081	S	0665									
77082	X	0260									
77083	X	0261									
77084	S	0335									
77261	B										
77262	B										
77263	B										
77280	X	0304									
77285	X	0305									
77290	X	0305									
77295	X	0310									
77299	X	0304									
77300	X	0304									
77301	X	0310									
77305	X	0304									
77310	X	0305									
77315	X	0305									
77321	X	0305									
77326	X	0304									
77327	X	0305									
77328	X	0305									
77331	X	0304									
77332	X	0303									
77333	X	0303									
77334	X	0303									
77336	X	0304									
77370	X	0304									
77371	S	0127									
77372	B										
77373	B										
77399	X	0304									
77401	S	0300									
77402	S	0300									
77403	S	0300									
77404	S	0300									
77406	S	0300									
77407	S	0300									
77408	S	0300									
77409	S	0300									
77411	S	0301									
77412	S	0301									
77413	S	0301									
77414	S	0301									
77416	S	0301									
77417	N										
77418	S	0412									
77421	N										
77422	S	0301									
77423	S	0301									
77427	B										
77431	B										
77432	B										
77435	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
77470	S	0299									
77499	B										
77520	S	0664									
77522	S	0664									
77523	S	0667									
77525	S	0667									
77600	S	0299									
77605	S	0299									
77610	S	0299									
77615	S	0299									
77620	S	0299									
77750	S	0301									
77761	S	0312									
77762	S	0312									
77763	S	0312									
77776	S	0312									
77777	S	0312									
77778	Q	0651									
77781	S	0313									
77782	S	0313									
77783	S	0313									
77784	S	0313									
77789	S	0300									
77790	N										
77799	S	0312									
78000	S	0389									
78001	S	0389									
78003	S	0392									
78006	S	0391									
78007	S	0391									
78010	S	0390									
78011	S	0390									
78015	S	0406									
78016	S	0406									
78018	S	0406									
78020	N										
78070	S	0391									
78075	S	0408									
78099	S	0390									
78102	S	0400									
78103	S	0400									
78104	S	0400									
78110	S	0393									
78111	S	0393									
78120	S	0393									
78121	S	0393									
78122	S	0393									
78130	S	0393									
78135	S	0393									
78140	S	0393									
78185	S	0400									
78190	S	0392									
78191	S	0392									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
78195	S	0400									
78199	S	0400									
78201	S	0394									
78202	S	0394									
78205	S	0394									
78206	S	0394									
78215	S	0394									
78216	S	0394									
78220	S	0394									
78223	S	0394									
78230	S	0395									
78231	S	0395									
78232	S	0395									
78258	S	0395									
78261	S	0395									
78262	S	0395									
78264	S	0395									
78267	A										
78268	A										
78270	S	0392									
78271	S	0392									
78272	S	0392									
78278	S	0395									
78282	S	0395									
78290	S	0395									
78291	S	0395									
78299	S	0395									
78300	S	0396									
78305	S	0396									
78306	S	0396									
78315	S	0396									
78320	S	0396									
78350	E										
78351	E										
78399	S	0396									
78414	S	0398									
78428	S	0398									
78445	S	0397									
78456	S	0397									
78457	S	0397									
78458	S	0397									
78459	S	0307									
78460	S	0377									
78461	S	0377									
78464	S	0377									
78465	S	0377									
78466	S	0398									
78468	S	0398									
78469	S	0398									
78472	S	0398									
78473	S	0398									
78478	N										
78480	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
78481	S	0398									
78483	S	0398									
78491	S	0307									
78492	S	0307									
78494	S	0398									
78496	N										
78499	S	0398									
78580	S	0401									
78584	S	0378									
78585	S	0378									
78586	S	0401									
78587	S	0401									
78588	S	0378									
78591	S	0401									
78593	S	0401									
78594	S	0401									
78596	S	0378									
78599	S	0401									
78600	S	0403									
78601	S	0403									
78605	S	0403									
78606	S	0402									
78607	S	0402									
78608	S	0308									
78609	E										
78610	S	0402									
78615	D										
78630	S	0402									
78635	S	0402									
78645	S	0403									
78647	S	0402									
78650	S	0402									
78660	S	0403									
78699	S	0403									
78700	S	0404									
78701	S	0404									
78707	S	0404									
78708	S	0404									
78709	S	0404									
78710	S	0404									
78725	S	0392									
78730	S	0389									
78740	S	0404									
78761	S	0404									
78799	S	0404									
78800	S	0406									
78801	S	0406									
78802	S	0414									
78803	S	0408									
78804	S	0408									
78805	S	0414									
78806	S	0414									
78807	S	0414									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
78811	S	0308									
78812	S	0308									
78813	S	0308									
78814	S	0308									
78815	S	0308									
78816	S	0308									
78890	N										
78891	N										
78999	S	0389									
79005	S	0407									
79101	S	0407									
79200	S	0413									
79300	S	0407									
79403	S	0413									
79440	S	0413									
79445	S	0407									
79999	S	0407									
80047	A										
80048	A										
80050	E										
80051	A										
80053	A										
80055	E										
80061	A										
80069	A										
80074	A										
80076	A										
80100	A										
80101	A										
80102	A										
80103	N										
80150	A										
80152	A										
80154	A										
80156	A										
80157	A										
80158	A										
80160	A										
80162	A										
80164	A										
80166	A										
80168	A										
80170	A										
80172	A										
80173	A										
80174	A										
80176	A										
80178	A										
80182	A										
80184	A										
80185	A										
80186	A										
80188	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
80190	A										
80192	A										
80194	A										
80195	A										
80196	A										
80197	A										
80198	A										
80200	A										
80201	A										
80202	A										
80299	A										
80400	A										
80402	A										
80406	A										
80408	A										
80410	A										
80412	A										
80414	A										
80415	A										
80416	A										
80417	A										
80418	A										
80420	A										
80422	A										
80424	A										
80426	A										
80428	A										
80430	A										
80432	A										
80434	A										
80435	A										
80436	A										
80438	A										
80439	A										
80440	A										
80500	X	0433									
80502	X	0342									
81000	A										
81001	A										
81002	A										
81003	A										
81005	A										
81007	A										
81015	A										
81020	A										
81025	A										
81050	A										
81099	A										
82000	A										
82003	A										
82009	A										
82010	A										
82013	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
82016	A										
82017	A										
82024	A										
82030	A										
82040	A										
82042	A										
82043	A										
82044	A										
82045	A										
82055	A										
82075	A										
82085	A										
82088	A										
82101	A										
82103	A										
82104	A										
82105	A										
82106	A										
82107	A										
82108	A										
82120	A										
82127	A										
82128	A										
82131	A										
82135	A										
82136	A										
82139	A										
82140	A										
82143	A										
82145	A										
82150	A										
82154	A										
82157	A										
82160	A										
82163	A										
82164	A										
82172	A										
82175	A										
82180	A										
82190	A										
82205	A										
82232	A										
82239	A										
82240	A										
82247	A										
82248	A										
82252	A										
82261	A										
82270	A										
82271	A										
82272	A										
82274	A										
82286	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
82300	A											
82306	A											
82307	A											
82308	A											
82310	A											
82330	A											
82331	A											
82340	A											
82355	A											
82360	A											
82365	A											
82370	A											
82373	A											
82374	A											
82375	A											
82376	A											
82378	A											
82379	A											
82380	A											
82382	A											
82383	A											
82384	A											
82387	A											
82390	A											
82397	A											
82415	A											
82435	A											
82436	A											
82438	A											
82441	A											
82465	A											
82480	A											
82482	A											
82485	A											
82486	A											
82487	A											
82488	A											
82489	A											
82491	A											
82492	A											
82495	A											
82507	A											
82520	A											
82523	A											
82525	A											
82528	A											
82530	A											
82533	A											
82540	A											
82541	A											
82542	A											
82543	A											
82544	A											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
82550	A										
82552	A										
82553	A										
82554	A										
82565	A										
82570	A										
82575	A										
82585	A										
82595	A										
82600	A										
82607	A										
82608	A										
82610	A										
82615	A										
82626	A										
82627	A										
82633	A										
82634	A										
82638	A										
82646	A										
82649	A										
82651	A										
82652	A										
82654	A										
82656	A										
82657	A										
82658	A										
82664	A										
82666	A										
82668	A										
82670	A										
82671	A										
82672	A										
82677	A										
82679	A										
82690	A										
82693	A										
82696	A										
82705	A										
82710	A										
82715	A										
82725	A										
82726	A										
82728	A										
82731	A										
82735	A										
82742	A										
82746	A										
82747	A										
82757	A										
82759	A										
82760	A										
82775	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
82776	A										
82784	A										
82785	A										
82787	A										
82800	A										
82803	A										
82805	A										
82810	A										
82820	A										
82926	A										
82928	A										
82938	A										
82941	A										
82943	A										
82945	A										
82946	A										
82947	A										
82948	A										
82950	A										
82951	A										
82952	A										
82953	A										
82955	A										
82960	A										
82962	A										
82963	A										
82965	A										
82975	A										
82977	A										
82978	A										
82979	A										
82980	A										
82985	A										
83001	A										
83002	A										
83003	A										
83008	A										
83009	A										
83010	A										
83012	A										
83013	A										
83014	A										
83015	A										
83018	A										
83020	A										
83021	A										
83026	A										
83030	A										
83033	A										
83036	A										
83037	A										
83045	A										
83050	A										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
83051	A										
83055	A										
83060	A										
83065	A										
83068	A										
83069	A										
83070	A										
83071	A										
83080	A										
83088	A										
83090	A										
83150	A										
83491	A										
83497	A										
83498	A										
83499	A										
83500	A										
83505	A										
83516	A										
83518	A										
83519	A										
83520	A										
83525	A										
83527	A										
83528	A										
83540	A										
83550	A										
83570	A										
83582	A										
83586	A										
83593	A										
83605	A										
83615	A										
83625	A										
83630	A										
83631	A										
83632	A										
83633	A										
83634	A										
83655	A										
83661	A										
83662	A										
83663	A										
83664	A										
83670	A										
83690	A										
83695	A										
83698	A										
83700	A										
83701	A										
83704	A										
83718	A										
83719	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
83721	A										
83727	A										
83735	A										
83775	A										
83785	A										
83788	A										
83789	A										
83805	A										
83825	A										
83835	A										
83840	A										
83857	A										
83858	A										
83864	A										
83866	A										
83872	A										
83873	A										
83874	A										
83880	A										
83883	A										
83885	A										
83887	A										
83890	A										
83891	A										
83892	A										
83893	A										
83894	A										
83896	A										
83897	A										
83898	A										
83900	A										
83901	A										
83902	A										
83903	A										
83904	A										
83905	A										
83906	A										
83907	A										
83908	A										
83909	A										
83912	A										
83913	A										
83914	A										
83915	A										
83916	A										
83918	A										
83919	A										
83921	A										
83925	A										
83930	A										
83935	A										
83937	A										
83945	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
83950	A										
83970	A										
83986	A										
83992	A										
83993	A										
84022	A										
84030	A										
84035	A										
84060	A										
84061	A										
84066	A										
84075	A										
84078	A										
84080	A										
84081	A										
84085	A										
84087	A										
84100	A										
84105	A										
84106	A										
84110	A										
84119	A										
84120	A										
84126	A										
84127	A										
84132	A										
84133	A										
84134	A										
84135	A										
84138	A										
84140	A										
84143	A										
84144	A										
84146	A										
84150	A										
84152	A										
84153	A										
84154	A										
84155	A										
84156	A										
84157	A										
84160	A										
84163	A										
84165	A										
84166	A										
84181	A										
84182	A										
84202	A										
84203	A										
84206	A										
84207	A										
84210	A										
84220	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
84228	A										
84233	A										
84234	A										
84235	A										
84238	A										
84244	A										
84252	A										
84255	A										
84260	A										
84270	A										
84275	A										
84285	A										
84295	A										
84300	A										
84302	A										
84305	A										
84307	A										
84311	A										
84315	A										
84375	A										
84376	A										
84377	A										
84378	A										
84379	A										
84392	A										
84402	A										
84403	A										
84425	A										
84430	A										
84432	A										
84436	A										
84437	A										
84439	A										
84442	A										
84443	A										
84445	A										
84446	A										
84449	A										
84450	A										
84460	A										
84466	A										
84478	A										
84479	A										
84480	A										
84481	A										
84482	A										
84484	A										
84485	A										
84488	A										
84490	A										
84510	A										
84512	A										
84520	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
84525	A										
84540	A										
84545	A										
84550	A										
84560	A										
84577	A										
84578	A										
84580	A										
84583	A										
84585	A										
84586	A										
84588	A										
84590	A										
84591	A										
84597	A										
84600	A										
84620	A										
84630	A										
84681	A										
84702	A										
84703	A										
84704	A										
84830	A										
84999	A										
85002	A										
85004	A										
85007	A										
85008	A										
85009	A										
85013	A										
85014	A										
85018	A										
85025	A										
85027	A										
85032	A										
85041	A										
85044	A										
85045	A										
85046	A										
85048	A										
85049	A										
85055	A										
85060	B										
85097	X	0343									
85130	A										
85170	A										
85175	A										
85210	A										
85220	A										
85230	A										
85240	A										
85244	A										
85245	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
85246	A										
85247	A										
85250	A										
85260	A										
85270	A										
85280	A										
85290	A										
85291	A										
85292	A										
85293	A										
85300	A										
85301	A										
85302	A										
85303	A										
85305	A										
85306	A										
85307	A										
85335	A										
85337	A										
85345	A										
85347	A										
85348	A										
85360	A										
85362	A										
85366	A										
85370	A										
85378	A										
85379	A										
85380	A										
85384	A										
85385	A										
85390	A										
85396	N										
85400	A										
85410	A										
85415	A										
85420	A										
85421	A										
85441	A										
85445	A										
85460	A										
85461	A										
85475	A										
85520	A										
85525	A										
85530	A										
85536	A										
85540	A										
85547	A										
85549	A										
85555	A										
85557	A										
85576	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
85597	A										
85610	A										
85611	A										
85612	A										
85613	A										
85635	A										
85651	A										
85652	A										
85660	A										
85670	A										
85675	A										
85705	A										
85730	A										
85732	A										
85810	A										
85999	A										
86000	A										
86001	A										
86003	A										
86005	A										
86021	A										
86022	A										
86023	A										
86038	A										
86039	A										
86060	A										
86063	A										
86077	X	0433									
86078	X	0343									
86079	X	0433									
86140	A										
86141	A										
86146	A										
86147	A										
86148	A										
86155	A										
86156	A										
86157	A										
86160	A										
86161	A										
86162	A										
86171	A										
86185	A										
86200	A										
86215	A										
86225	A										
86226	A										
86235	A										
86243	A										
86255	A										
86256	A										
86277	A										
86280	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
86294	A										
86300	A										
86301	A										
86304	A										
86308	A										
86309	A										
86310	A										
86316	A										
86317	A										
86318	A										
86320	A										
86325	A										
86327	A										
86329	A										
86331	A										
86332	A										
86334	A										
86335	A										
86336	A										
86337	A										
86340	A										
86341	A										
86343	A										
86344	A										
86353	A										
86355	A										
86356	A										
86357	A										
86359	A										
86360	A										
86361	A										
86367	A										
86376	A										
86378	A										
86382	A										
86384	A										
86403	A										
86406	A										
86430	A										
86431	A										
86480	A										
86485	X	0341									
86486	A										
86490	X	0341									
86510	X	0341									
86580	X	0341									
86586	D										
86590	A										
86592	A										
86593	A										
86602	A										
86603	A										
86606	A										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
86609	A										
86611	A										
86612	A										
86615	A										
86617	A										
86618	A										
86619	A										
86622	A										
86625	A										
86628	A										
86631	A										
86632	A										
86635	A										
86638	A										
86641	A										
86644	A										
86645	A										
86648	A										
86651	A										
86652	A										
86653	A										
86654	A										
86658	A										
86663	A										
86664	A										
86665	A										
86666	A										
86668	A										
86671	A										
86674	A										
86677	A										
86682	A										
86684	A										
86687	A										
86688	A										
86689	A										
86692	A										
86694	A										
86695	A										
86696	A										
86698	A										
86701	A										
86702	A										
86703	A										
86704	A										
86705	A										
86706	A										
86707	A										
86708	A										
86709	A										
86710	A										
86713	A										
86717	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
86720	A										
86723	A										
86727	A										
86729	A										
86732	A										
86735	A										
86738	A										
86741	A										
86744	A										
86747	A										
86750	A										
86753	A										
86756	A										
86757	A										
86759	A										
86762	A										
86765	A										
86768	A										
86771	A										
86774	A										
86777	A										
86778	A										
86781	A										
86784	A										
86787	A										
86788	A										
86789	A										
86790	A										
86793	A										
86800	A										
86803	A										
86804	A										
86805	A										
86806	A										
86807	A										
86808	A										
86812	A										
86813	A										
86816	A										
86817	A										
86821	A										
86822	A										
86849	A										
86850	X	0345									
86860	X	0346									
86870	X	0346									
86880	X	0409									
86885	X	0409									
86886	X	0409									
86890	X	0347									
86891	X	0346									
86900	X	0409									
86901	X	0409									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
86903	X	0345									
86904	X	0346									
86905	X	0345									
86906	X	0345									
86910	E										
86911	E										
86920	X	0346									
86921	X	0345									
86922	X	0346									
86923	X	0345									
86927	X	0345									
86930	X	0347									
86931	X	0347									
86932	X	0347									
86940	A										
86941	A										
86945	X	0345									
86950	X	0345									
86960	X	0345									
86965	X	0346									
86970	X	0345									
86971	X	0345									
86972	X	0346									
86975	X	0346									
86976	X	0345									
86977	X	0346									
86978	X	0346									
86985	X	0345									
86999	X	0345									
87001	A										
87003	A										
87015	A										
87040	A										
87045	A										
87046	A										
87070	A										
87071	A										
87073	A										
87075	A										
87076	A										
87077	A										
87081	A										
87084	A										
87086	A										
87088	A										
87101	A										
87102	A										
87103	A										
87106	A										
87107	A										
87109	A										
87110	A										
87116	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
87118	A										
87140	A										
87143	A										
87147	A										
87149	A										
87152	A										
87158	A										
87164	A										
87166	A										
87168	A										
87169	A										
87172	A										
87176	A										
87177	A										
87181	A										
87184	A										
87185	A										
87186	A										
87187	A										
87188	A										
87190	A										
87197	A										
87205	A										
87206	A										
87207	A										
87209	A										
87210	A										
87220	A										
87230	A										
87250	A										
87252	A										
87253	A										
87254	A										
87255	A										
87260	A										
87265	A										
87267	A										
87269	A										
87270	A										
87271	A										
87272	A										
87273	A										
87274	A										
87275	A										
87276	A										
87277	A										
87278	A										
87279	A										
87280	A										
87281	A										
87283	A										
87285	A										
87290	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
87299	A											
87300	A											
87301	A											
87305	A											
87320	A											
87324	A											
87327	A											
87328	A											
87329	A											
87332	A											
87335	A											
87336	A											
87337	A											
87338	A											
87339	A											
87340	A											
87341	A											
87350	A											
87380	A											
87385	A											
87390	A											
87391	A											
87400	A											
87420	A											
87425	A											
87427	A											
87430	A											
87449	A											
87450	A											
87451	A											
87470	A											
87471	A											
87472	A											
87475	A											
87476	A											
87477	A											
87480	A											
87481	A											
87482	A											
87485	A											
87486	A											
87487	A											
87490	A											
87491	A											
87492	A											
87495	A											
87496	A											
87497	A											
87498	A											
87500	A											
87510	A											
87511	A											
87512	A											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
87515	A											
87516	A											
87517	A											
87520	A											
87521	A											
87522	A											
87525	A											
87526	A											
87527	A											
87528	A											
87529	A											
87530	A											
87531	A											
87532	A											
87533	A											
87534	A											
87535	A											
87536	A											
87537	A											
87538	A											
87539	A											
87540	A											
87541	A											
87542	A											
87550	A											
87551	A											
87552	A											
87555	A											
87556	A											
87557	A											
87560	A											
87561	A											
87562	A											
87580	A											
87581	A											
87582	A											
87590	A											
87591	A											
87592	A											
87620	A											
87621	A											
87622	A											
87640	A											
87641	A											
87650	A											
87651	A											
87652	A											
87653	A											
87660	A											
87797	A											
87798	A											
87799	A											
87800	A											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
87801	A										
87802	A										
87803	A										
87804	A										
87807	A										
87808	A										
87809	A										
87810	A										
87850	A										
87880	A										
87899	A										
87900	A										
87901	A										
87902	A										
87903	A										
87904	A										
87999	A										
88000	E										
88005	E										
88007	E										
88012	E										
88014	E										
88016	E										
88020	E										
88025	E										
88027	E										
88028	E										
88029	E										
88036	E										
88037	E										
88040	E										
88045	E										
88099	E										
88104	X	0433									
88106	X	0433									
88107	X	0343									
88108	X	0343									
88112	X	0343									
88125	X	0433									
88130	A										
88140	A										
88141	N										
88142	A										
88143	A										
88147	A										
88148	A										
88150	A										
88152	A										
88153	A										
88154	A										
88155	A										
88160	X	0433									
88161	X	0433									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
88162	X	0343									
88164	A										
88165	A										
88166	A										
88167	A										
88172	X	0343									
88173	X	0343									
88174	A										
88175	A										
88182	X	0343									
88184	X	0433									
88185	X	0433									
88187	X	0433									
88188	X	0433									
88189	X	0343									
88199	X	0342									
88230	A										
88233	A										
88235	A										
88237	A										
88239	A										
88240	A										
88241	A										
88245	A										
88248	A										
88249	A										
88261	A										
88262	A										
88263	A										
88264	A										
88267	A										
88269	A										
88271	A										
88272	A										
88273	A										
88274	A										
88275	A										
88280	A										
88283	A										
88285	A										
88289	A										
88291	M										
88299	X	0342									
88300	X	0433									
88302	X	0433									
88304	X	0343									
88305	X	0343									
88307	X	0344									
88309	X	0344									
88311	X	0433									
88312	X	0433									
88313	X	0433									
88314	X	0433									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
88318	X	0433									
88319	X	0433									
88321	X	0433									
88323	X	0343									
88325	X	0344									
88329	X	0433									
88331	X	0343									
88332	X	0433									
88333	X	0343									
88334	X	0433									
88342	X	0343									
88346	X	0343									
88347	X	0343									
88348	X	0661									
88349	X	0661									
88355	X	0343									
88356	X	0344									
88358	X	0344									
88360	X	0343									
88361	X	0344									
88362	X	0344									
88365	X	0344									
88367	X	0344									
88368	X	0343									
88371	A										
88372	A										
88380	N										
88381	N										
88384	X	0433									
88385	X	0343									
88386	X	0344									
88399	X	0342									
88400	A										
89049	X	0343									
89050	A										
89051	A										
89055	A										
89060	A										
89100	X	0360									
89105	X	0360									
89125	A										
89130	X	0360									
89132	X	0360									
89135	X	0360									
89136	X	0360									
89140	X	0360									
89141	X	0360									
89160	A										
89190	A										
89220	X	0343									
89225	A										
89230	X	0343									
89235	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
89240	X	0342									
89250	X	0344									
89251	X	0344									
89253	X	0344									
89254	X	0344									
89255	X	0344									
89257	X	0344									
89258	X	0344									
89259	X	0344									
89260	X	0344									
89261	X	0344									
89264	X	0344									
89268	X	0344									
89272	X	0344									
89280	X	0344									
89281	X	0344									
89290	X	0344									
89291	X	0344									
89300	A										
89310	A										
89320	A										
89321	A										
89322	A										
89325	A										
89329	A										
89330	A										
89331	A										
89335	X	0344									
89342	X	0344									
89343	X	0344									
89344	X	0344									
89346	X	0344									
89352	X	0344									
89353	X	0344									
89354	X	0344									
89356	X	0344									
90281	E										
90283	E										
90284	E										
90287	E										
90288	E										
90291	E										
90296	N										
90371	K	1630									
90375	K	9133									
90376	K	9134									
90378	E										
90379	E										
90384	E										
90385	N										
90386	E										
90389	E										
90393	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
90396	K	9135									
90399	E										
90465	B										
90466	B										
90467	B										
90468	B										
90471	S	0437									
90472	S	0436									
90473	S	0436									
90474	S	0436									
90476	N										
90477	N										
90581	N										
90585	K	9137									
90586	B										
90632	N										
90633	N										
90634	N										
90636	N										
90645	N										
90646	N										
90647	N										
90648	N										
90649	B										
90655	L										
90656	L										
90657	L										
90658	L										
90660	L										
90661	L										
90662	L										
90663	L										
90665	N										
90669	L										
90675	K	9139									
90676	K	9140									
90680	N										
90690	N										
90691	N										
90692	N										
90693	B										
90698	N										
90700	N										
90701	N										
90702	N										
90703	N										
90704	N										
90705	N										
90706	N										
90707	N										
90708	K	9141									
90710	N										
90712	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
90713	N										
90714	N										
90715	N										
90716	B										
90717	N										
90718	N										
90719	N										
90720	N										
90721	N										
90723	E										
90725	N										
90727	N										
90732	L										
90733	K	9143									
90734	K	9145									
90735	K	9144									
90736	B										
90740	F										
90743	F										
90744	F										
90746	F										
90747	F										
90748	E										
90749	N										
90760	S	0440									
90761	S	0437									
90765	S	0440									
90766	S	0437									
90767	S	0437									
90768	N										
90769	S	0440									
90770	S	0437									
90771	S	0438									
90772	S	0437									
90773	S	0438									
90774	S	0438									
90775	S	0438									
90776	N										
90779	S	0436									
90801	Q	0323									
90802	Q	0323									
90804	Q	0322									
90805	Q	0322									
90806	Q	0323									
90807	Q	0323									
90808	Q	0323									
90809	Q	0323									
90810	Q	0322									
90811	Q	0322									
90812	Q	0323									
90813	Q	0323									
90814	Q	0323									
90815	Q	0323									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
90816	Q	0322							
90817	Q	0322							
90818	Q	0323							
90819	Q	0323							
90821	Q	0323							
90822	Q	0323							
90823	Q	0322							
90824	Q	0322							
90826	Q	0323							
90827	Q	0323							
90828	Q	0323							
90829	Q	0323							
90845	Q	0323							
90846	Q	0324							
90847	Q	0324							
90849	Q	0325							
90853	Q	0325							
90857	Q	0325							
90862	Q	0606							
90865	Q	0323							
90870	S	0320							
90875	E								
90876	E								
90880	Q	0323							
90882	E								
90885	N								
90887	N								
90889	N								
90899	Q	0322							
90901	A								
90911	T	0126							
90918	E								
90919	E								
90920	E								
90921	E								
90922	E								
90923	E								
90924	E								
90925	E								
90935	S	0170							
90937	B								
90940	N								
90945	S	0170							
90947	B								
90989	B								
90993	B								
90997	B								
90999	B								
91000	X	0361							
91010	X	0361							
91011	X	0361							
91012	X	0361							
91020	X	0361							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
91022	X	0361									
91030	X	0361									
91034	X	0361									
91035	X	0361									
91037	X	0361									
91038	X	0361									
91040	X	0360									
91052	X	0361									
91055	X	0360									
91065	X	0360									
91100	X	0360									
91105	X	0360									
91110	T	0142									
91111	T	0141									
91120	T	0126									
91122	T	0164									
91123	N										
91132	X	0360									
91133	X	0360									
91299	X	0360									
92002	V	0605									
92004	V	0606									
92012	V	0604									
92014	V	0605									
92015	E										
92018	T	0699									
92019	T	0699									
92020	S	0230									
92025	S	0698									
92060	S	0698									
92065	S	0698									
92070	N										
92081	S	0230									
92082	S	0698									
92083	S	0698									
92100	N										
92120	S	0698									
92130	S	0230									
92135	S	0230									
92136	S	0698									
92140	S	0230									
92225	S	0230									
92226	S	0698									
92230	S	0231									
92235	S	0231									
92240	S	0231									
92250	S	0698									
92260	S	0230									
92265	S	0698									
92270	S	0230									
92275	S	0231									
92283	S	0230									
92284	S	0698									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
92285	S	0698									
92286	S	0231									
92287	S	0231									
92310	E										
92311	S	0698									
92312	S	0698									
92313	S	0230									
92314	E										
92315	S	0230									
92316	S	0698									
92317	S	0230									
92325	S	0230									
92326	S	0698									
92340	E										
92341	E										
92342	E										
92352	S	0698									
92353	S	0230									
92354	S	0230									
92355	S	0230									
92358	S	0230									
92370	E										
92371	S	0230									
92499	S	0230									
92502	T	0251									
92504	N										
92506	A										
92507	A										
92508	A										
92511	T	0071									
92512	X	0363									
92516	X	0660									
92520	X	0660									
92526	A										
92531	N										
92532	N										
92533	N										
92534	N										
92541	X	0363									
92542	X	0363									
92543	X	0660									
92544	X	0363									
92545	X	0363									
92546	X	0660									
92547	N										
92548	X	0660									
92551	E										
92552	X	0364									
92553	X	0365									
92555	X	0364									
92556	X	0364									
92557	X	0365									
92559	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
92560	E										
92561	X	0364									
92562	X	0364									
92563	X	0364									
92564	X	0364									
92565	X	0364									
92567	X	0364									
92568	X	0364									
92569	X	0364									
92571	X	0364									
92572	X	0366									
92575	X	0364									
92576	X	0364									
92577	X	0366									
92579	X	0365									
92582	X	0365									
92583	X	0364									
92584	S	0216									
92585	S	0216									
92586	S	0218									
92587	X	0363									
92588	X	0660									
92590	E										
92591	E										
92592	E										
92593	E										
92594	E										
92595	E										
92596	X	0364									
92597	A										
92601	X	0366									
92602	X	0366									
92603	X	0366									
92604	X	0366									
92605	A										
92606	A										
92607	A										
92608	A										
92609	A										
92610	A										
92611	A										
92612	A										
92613	B										
92614	A										
92615	E										
92616	A										
92617	E										
92620	X	0365									
92621	N										
92625	X	0365									
92626	X	0365									
92627	N										
92630	E										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
92633	E										
92640	X	0365									
92700	X	0364									
92950	S	0094									
92953	S	0094									
92960	S	0679									
92961	S	0679									
92970	C										
92971	C										
92973	T	0088									
92974	T	0103									
92975	C										
92977	T	0676									
92978	N										
92979	N										
92980	T	0104									
92981	T	0104									
92982	T	0083									
92984	T	0083									
92986	T	0083									
92987	T	0083									
92990	T	0083									
92992	C										
92993	C										
92995	T	0082									
92996	T	0082									
92997	T	0083									
92998	T	0083									
93000	B										
93005	S	0099									
93010	B										
93012	N										
93014	B										
93015	B										
93016	B										
93017	X	0100									
93018	B										
93024	X	0100									
93025	X	0100									
93040	B										
93041	S	0099									
93042	B										
93224	B										
93225	X	0097									
93226	X	0097									
93227	B										
93230	B										
93231	X	0097									
93232	X	0097									
93233	B										
93235	B										
93236	X	0097									
93237	B										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
93268	B										
93270	X	0097									
93271	S	0663									
93272	B										
93278	X	0340									
93303	S	0269									
93304	S	0697									
93307	S	0269									
93308	S	0697									
93312	S	0270									
93313	S	0270									
93314	N										
93315	S	0270									
93316	S	0270									
93317	N										
93318	S	0270									
93320	N										
93321	N										
93325	N										
93350	S	0269									
93501	T	0080									
93503	T	0103									
93505	T	0103									
93508	T	0080									
93510	T	0080									
93511	T	0080									
93514	T	0080									
93524	T	0080									
93526	T	0080									
93527	T	0080									
93528	T	0080									
93529	T	0080									
93530	T	0080									
93531	T	0080									
93532	T	0080									
93533	T	0080									
93539	N										
93540	N										
93541	N										
93542	N										
93543	N										
93544	N										
93545	N										
93555	N										
93556	N										
93561	N										
93562	N										
93571	N										
93572	N										
93580	T	0434									
93581	T	0434									
93600	S	0084									
93602	S	0084									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
93603	S	0084							
93609	N								
93610	S	0084							
93612	S	0084							
93613	N								
93615	S	0084							
93616	S	0084							
93618	S	0084							
93619	Q	0085							
93620	Q	0085							
93621	N								
93622	N								
93623	N								
93624	T	0085							
93631	N								
93640	N								
93641	N								
93642	S	0084							
93650	Q	0085							
93651	Q	0086							
93652	Q	0086							
93660	S	0101							
93662	N								
93668	E								
93701	S	0099							
93720	B								
93721	X	0368							
93722	B								
93724	S	0690							
93727	S	0690							
93731	S	0690							
93732	S	0690							
93733	S	0690							
93734	S	0690							
93735	S	0690							
93736	S	0690							
93740	X	0368							
93741	S	0689							
93742	S	0689							
93743	S	0689							
93744	S	0689							
93745	S	0689							
93760	E								
93762	E								
93770	N								
93784	E								
93786	X	0097							
93788	X	0097							
93790	B								
93797	S	0095							
93798	S	0095							
93799	X	0097							
93875	S	0096							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
93880	S	0267									
93882	S	0267									
93886	S	0267									
93888	S	0265									
93890	S	0266									
93892	S	0266									
93893	S	0266									
93922	S	0096									
93923	S	0096									
93924	S	0096									
93925	S	0267									
93926	S	0266									
93930	S	0267									
93931	S	0266									
93965	S	0096									
93970	S	0267									
93971	S	0266									
93975	S	0267									
93976	S	0267									
93978	S	0267									
93979	S	0266									
93980	S	0267									
93981	S	0267									
93982	X	0097									
93990	S	0266									
94002	S	0079									
94003	S	0079									
94004	B										
94005	B										
94010	X	0368									
94014	X	0367									
94015	X	0367									
94016	A										
94060	X	0368									
94070	X	0369									
94150	X	0367									
94200	X	0367									
94240	X	0368									
94250	X	0367									
94260	X	0368									
94350	X	0368									
94360	X	0367									
94370	X	0367									
94375	X	0368									
94400	X	0367									
94450	X	0368									
94452	X	0368									
94453	X	0367									
94610	S	0077									
94620	X	0368									
94621	X	0369									
94640	S	0077									
94642	S	0078									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
94644	S	0078									
94645	S	0078									
94660	S	0078									
94662	S	0079									
94664	S	0077									
94667	S	0077									
94668	S	0077									
94680	X	0368									
94681	X	0368									
94690	X	0367									
94720	X	0368									
94725	X	0368									
94750	X	0368									
94760	N										
94761	N										
94762	Q	0097									
94770	X	0367									
94772	X	0369									
94774	B										
94775	X	0097									
94776	X	0097									
94777	B										
94799	X	0367									
95004	X	0381									
95010	X	0381									
95012	X	0367									
95015	X	0381									
95024	X	0381									
95027	X	0381									
95028	X	0381									
95044	X	0381									
95052	X	0381									
95056	X	0370									
95060	X	0370									
95065	X	0381									
95070	X	0369									
95071	X	0369									
95075	X	0361									
95115	S	0436									
95117	S	0437									
95120	E										
95125	E										
95130	E										
95131	E										
95132	E										
95133	E										
95134	E										
95144	S	0437									
95145	S	0437									
95146	S	0437									
95147	S	0437									
95148	S	0437									
95149	S	0437									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
95165	S	0437							
95170	S	0437							
95180	X	0370							
95199	X	0381							
95250	V	0607							
95251	B								
95805	S	0209							
95806	S	0213							
95807	S	0209							
95808	S	0209							
95810	S	0209							
95811	S	0209							
95812	S	0213							
95813	S	0213							
95816	S	0213							
95819	S	0213							
95822	S	0213							
95824	S	0216							
95827	S	0213							
95829	N								
95830	B								
95831	A								
95832	A								
95833	A								
95834	A								
95851	A								
95852	A								
95857	S	0218							
95860	S	0218							
95861	S	0218							
95863	S	0218							
95864	S	0218							
95865	S	0218							
95866	S	0218							
95867	S	0218							
95868	S	0218							
95869	S	0218							
95870	S	0215							
95872	S	0218							
95873	N								
95874	N								
95875	S	0215							
95900	S	0215							
95903	S	0215							
95904	S	0215							
95920	N								
95921	S	0218							
95922	S	0218							
95923	S	0218							
95925	S	0216							
95926	S	0216							
95927	S	0216							
95928	S	0218							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
95929	S	0218									
95930	S	0216									
95933	S	0215									
95934	S	0215									
95936	S	0215									
95937	S	0218									
95950	S	0209									
95951	S	0209									
95953	S	0209									
95954	S	0218									
95955	N										
95956	S	0209									
95957	N										
95958	S	0213									
95961	S	0216									
95962	S	0216									
95965	S	0067									
95966	S	0065									
95967	S	0065									
95970	S	0218									
95971	S	0692									
95972	S	0663									
95973	S	0663									
95974	S	0663									
95975	S	0692									
95978	S	0692									
95979	S	0663									
95980	N										
95981	S	0218									
95982	S	0692									
95990	T	0125									
95991	T	0125									
95999	S	0215									
96000	S	0216									
96001	S	0216									
96002	S	0218									
96003	S	0215									
96004	B										
96020	N										
96040	B										
96101	Q	0382									
96102	Q	0382									
96103	Q	0373									
96105	A										
96110	Q	0373									
96111	Q	0382									
96116	Q	0382									
96118	Q	0382									
96119	Q	0382									
96120	Q	0373									
96125	A										
96150	Q	0432									
96151	Q	0432									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
96152	Q	0432									
96153	Q	0432									
96154	Q	0432									
96155	E										
96401	S	0438									
96402	S	0438									
96405	S	0438									
96406	S	0438									
96409	S	0439									
96411	S	0439									
96413	S	0441									
96415	S	0438									
96416	S	0441									
96417	S	0438									
96420	S	0439									
96422	S	0441									
96423	S	0438									
96425	S	0441									
96440	S	0441									
96445	S	0441									
96450	S	0441									
96521	S	0440									
96522	S	0440									
96523	Q	0624									
96542	S	0438									
96549	S	0436									
96567	T	0013									
96570	T	0015									
96571	T	0015									
96900	S	0001									
96902	N										
96904	N										
96910	S	0001									
96912	S	0001									
96913	S	0683									
96920	T	0015									
96921	T	0015									
96922	T	0015									
96999	T	0012									
97001	A										
97002	A										
97003	A										
97004	A										
97005	E										
97006	E										
97010	A										
97012	A										
97014	E										
97016	A										
97018	A										
97022	A										
97024	A										
97026	A										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
97028	A										
97032	A										
97033	A										
97034	A										
97035	A										
97036	A										
97039	A										
97110	A										
97112	A										
97113	A										
97116	A										
97124	A										
97139	A										
97140	A										
97150	A										
97530	A										
97532	A										
97533	A										
97535	A										
97537	A										
97542	A										
97545	A										
97546	A										
97597	T	0015									
97598	T	0015									
97602	T	0015									
97605	T	0013									
97606	T	0015									
97750	A										
97755	A										
97760	A										
97761	A										
97762	A										
97799	A										
97802	A										
97803	A										
97804	A										
97810	E										
97811	E										
97813	E										
97814	E										
98925	S	0060									
98926	S	0060									
98927	S	0060									
98928	S	0060									
98929	S	0060									
98940	S	0060									
98941	S	0060									
98942	S	0060									
98943	E										
98960	E										
98961	E										
98962	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
98966	E										
98967	E										
98968	E										
98969	E										
99000	E										
99001	E										
99002	B										
99024	B										
99026	E										
99027	E										
99050	B										
99051	B										
99053	B										
99056	B										
99058	B										
99060	B										
99070	B										
99071	B										
99075	E										
99078	N										
99080	B										
99082	B										
99090	B										
99091	N										
99100	B										
99116	B										
99135	B										
99140	B										
99143	N										
99144	N										
99145	N										
99148	N										
99149	N										
99150	N										
99170	T	0191									
99172	E										
99173	E										
99174	E										
99175	N										
99183	B										
99185	N										
99186	N										
99190	C										
99191	C										
99192	C										
99195	X	0624									
99199	B										
99201	V	0604									
99202	V	0605									
99203	V	0606									
99204	V	0607									
99205	Q	0608									
99211	V	0604									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
99212	V	0605									
99213	V	0605									
99214	V	0606									
99215	Q	0607									
99217	B										
99218	B										
99219	B										
99220	B										
99221	B										
99222	B										
99223	B										
99231	B										
99232	B										
99233	B										
99234	B										
99235	B										
99236	B										
99238	B										
99239	B										
99241	B										
99242	B										
99243	B										
99244	B										
99245	B										
99251	C										
99252	C										
99253	C										
99254	C										
99255	C										
99281	V	0609									
99282	V	0613									
99283	V	0614									
99284	Q	0615									
99285	Q	0616									
99288	B										
99289	N										
99290	N										
99291	Q	0617									
99292	N										
99293	C										
99294	C										
99295	C										
99296	C										
99298	C										
99299	C										
99300	N										
99304	B										
99305	B										
99306	B										
99307	B										
99308	B										
99309	B										
99310	B										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
99315	B										
99316	B										
99318	B										
99324	B										
99325	B										
99326	B										
99327	B										
99328	B										
99334	B										
99335	B										
99336	B										
99337	B										
99339	B										
99340	B										
99341	B										
99342	B										
99343	B										
99344	B										
99345	B										
99347	B										
99348	B										
99349	B										
99350	B										
99354	N										
99355	N										
99356	C										
99357	C										
99358	N										
99359	N										
99360	B										
99361	D										
99362	D										
99363	B										
99364	B										
99366	N										
99367	N										
99368	N										
99371	D										
99372	D										
99373	D										
99374	B										
99375	E										
99377	B										
99378	E										
99379	B										
99380	B										
99381	E										
99382	E										
99383	E										
99384	E										
99385	E										
99386	E										
99387	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
99391	E										
99392	E										
99393	E										
99394	E										
99395	E										
99396	E										
99397	E										
99401	E										
99402	E										
99403	E										
99404	E										
99406	X	0031									
99407	X	0031									
99408	E										
99409	E										
99411	E										
99412	E										
99420	E										
99429	E										
99431	V	0605									
99432	N										
99433	C										
99435	B										
99436	N										
99440	S	0094									
99441	E										
99442	E										
99443	E										
99444	E										
99450	E										
99455	B										
99456	B										
99477	C										
99499	B										
99500	E										
99501	E										
99502	E										
99503	E										
99504	E										
99505	E										
99506	E										
99507	E										
99509	E										
99510	E										
99511	E										
99512	E										
99600	E										
99601	E										
99602	E										
99605	E										
99606	E										
99607	E										
A0021	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A0080	E										
A0090	E										
A0100	E										
A0110	E										
A0120	E										
A0130	E										
A0140	E										
A0160	E										
A0170	E										
A0180	E										
A0190	E										
A0200	E										
A0210	E										
A0225	E										
A0380	E										
A0382	A										
A0384	A										
A0390	E										
A0392	A										
A0394	A										
A0396	A										
A0398	A										
A0420	A										
A0422	A										
A0424	A										
A0425	A										
A0426	A										
A0427	A										
A0428	A										
A0429	A										
A0430	A										
A0431	A										
A0432	A										
A0433	A										
A0434	A										
A0435	A										
A0436	A										
A0888	E										
A0998	E										
A0999	A										
A4206	E										
A4207	E										
A4208	E										
A4209	E										
A4210	E										
A4211	E										
A4212	B										
A4213	E										
A4215	E										
A4216	A										
A4217	A										
A4218	N										
A4220	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A4221	Y										
A4222	Y										
A4223	E										
A4230	Y										
A4231	Y										
A4232	E										
A4233	Y										
A4234	Y										
A4235	Y										
A4236	Y										
A4244	E										
A4245	E										
A4246	E										
A4247	E										
A4248	N										
A4250	E										
A4252	E										
A4253	Y										
A4255	Y										
A4256	Y										
A4257	Y										
A4258	Y										
A4259	Y										
A4261	E										
A4262	N										
A4263	N										
A4265	Y										
A4266	E										
A4267	E										
A4268	E										
A4269	E										
A4270	N										
A4280	A										
A4281	E										
A4282	E										
A4283	E										
A4284	E										
A4285	E										
A4286	E										
A4290	B										
A4300	N										
A4301	N										
A4305	N										
A4306	N										
A4310	A										
A4311	A										
A4312	A										
A4313	A										
A4314	A										
A4315	A										
A4316	A										
A4320	A										
A4321	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
A4322	A											
A4326	A											
A4327	A											
A4328	A											
A4330	A											
A4331	A											
A4332	A											
A4333	A											
A4334	A											
A4335	A											
A4338	A											
A4340	A											
A4344	A											
A4346	A											
A4349	A											
A4351	A											
A4352	A											
A4353	A											
A4354	A											
A4355	A											
A4356	A											
A4357	A											
A4358	A											
A4361	A											
A4362	A											
A4363	A											
A4364	A											
A4365	A											
A4366	A											
A4367	A											
A4368	A											
A4369	A											
A4371	A											
A4372	A											
A4373	A											
A4375	A											
A4376	A											
A4377	A											
A4378	A											
A4379	A											
A4380	A											
A4381	A											
A4382	A											
A4383	A											
A4384	A											
A4385	A											
A4387	A											
A4388	A											
A4389	A											
A4390	A											
A4391	A											
A4392	A											
A4393	A											



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
A4394	A											
A4395	A											
A4396	A											
A4397	A											
A4398	A											
A4399	A											
A4400	A											
A4402	A											
A4404	A											
A4405	A											
A4406	A											
A4407	A											
A4408	A											
A4409	A											
A4410	A											
A4411	A											
A4412	A											
A4413	A											
A4414	A											
A4415	A											
A4416	A											
A4417	A											
A4418	A											
A4419	A											
A4420	A											
A4421	E											
A4422	A											
A4423	A											
A4424	A											
A4425	A											
A4426	A											
A4427	A											
A4428	A											
A4429	A											
A4430	A											
A4431	A											
A4432	A											
A4433	A											
A4434	A											
A4450	A											
A4452	A											
A4455	A											
A4458	E											
A4461	A											
A4463	A											
A4465	A											
A4470	A											
A4480	A											
A4481	A											
A4483	A											
A4490	E											
A4495	E											
A4500	E											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A4510	E										
A4520	E										
A4550	B										
A4554	E										
A4556	Y										
A4557	Y										
A4558	Y										
A4559	Y										
A4561	N										
A4562	N										
A4565	A										
A4570	E										
A4575	E										
A4580	E										
A4590	E										
A4595	Y										
A4600	Y										
A4601	Y										
A4604	Y										
A4605	Y										
A4606	A										
A4608	Y										
A4611	Y										
A4612	Y										
A4613	Y										
A4614	N										
A4615	Y										
A4616	Y										
A4617	Y										
A4618	Y										
A4619	Y										
A4620	Y										
A4623	A										
A4624	Y										
A4625	A										
A4626	A										
A4627	E										
A4628	Y										
A4629	A										
A4630	Y										
A4633	Y										
A4634	A										
A4635	Y										
A4636	Y										
A4637	Y										
A4638	Y										
A4639	Y										
A4640	Y										
A4641	N										
A4642	N										
A4648	N										
A4649	A										
A4650	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
A4651	A											
A4652	A											
A4653	A											
A4657	A											
A4660	A											
A4663	A											
A4670	E											
A4671	B											
A4672	B											
A4673	B											
A4674	B											
A4680	A											
A4690	A											
A4706	A											
A4707	A											
A4708	A											
A4709	A											
A4714	A											
A4719	A											
A4720	A											
A4721	A											
A4722	A											
A4723	A											
A4724	A											
A4725	A											
A4726	A											
A4728	B											
A4730	A											
A4736	A											
A4737	A											
A4740	A											
A4750	A											
A4755	A											
A4760	A											
A4765	A											
A4766	A											
A4770	A											
A4771	A											
A4772	A											
A4773	A											
A4774	A											
A4802	A											
A4860	A											
A4870	A											
A4890	A											
A4911	A											
A4913	A											
A4918	A											
A4927	A											
A4928	A											
A4929	A											
A4930	A											
A4931	A											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A4932	E										
A5051	A										
A5052	A										
A5053	A										
A5054	A										
A5055	A										
A5061	A										
A5062	A										
A5063	A										
A5071	A										
A5072	A										
A5073	A										
A5081	A										
A5082	A										
A5083	A										
A5093	A										
A5102	A										
A5105	A										
A5112	A										
A5113	A										
A5114	A										
A5120	A										
A5121	A										
A5122	A										
A5126	A										
A5131	A										
A5200	A										
A5500	Y										
A5501	Y										
A5503	Y										
A5504	Y										
A5505	Y										
A5506	Y										
A5507	Y										
A5508	Y										
A5510	E										
A5512	Y										
A5513	Y										
A6000	E										
A6010	A										
A6011	A										
A6021	A										
A6022	A										
A6023	A										
A6024	A										
A6025	E										
A6154	A										
A6196	A										
A6197	A										
A6198	A										
A6199	A										
A6200	E										
A6201	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A6202	E										
A6203	A										
A6204	A										
A6205	A										
A6206	A										
A6207	A										
A6208	A										
A6209	A										
A6210	A										
A6211	A										
A6212	A										
A6213	A										
A6214	A										
A6215	A										
A6216	A										
A6217	A										
A6218	A										
A6219	A										
A6220	A										
A6221	A										
A6222	A										
A6223	A										
A6224	A										
A6228	A										
A6229	A										
A6230	A										
A6231	A										
A6232	A										
A6233	A										
A6234	A										
A6235	A										
A6236	A										
A6237	A										
A6238	A										
A6239	A										
A6240	A										
A6241	A										
A6242	A										
A6243	A										
A6244	A										
A6245	A										
A6246	A										
A6247	A										
A6248	A										
A6250	A										
A6251	A										
A6252	A										
A6253	A										
A6254	A										
A6255	A										
A6256	A										
A6257	A										
A6258	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A6259	A										
A6260	A										
A6261	A										
A6262	A										
A6266	A										
A6402	A										
A6403	A										
A6404	A										
A6407	A										
A6410	A										
A6411	A										
A6412	E										
A6413	E										
A6441	A										
A6442	A										
A6443	A										
A6444	A										
A6445	A										
A6446	A										
A6447	A										
A6448	A										
A6449	A										
A6450	A										
A6451	A										
A6452	A										
A6453	A										
A6454	A										
A6455	A										
A6456	A										
A6457	A										
A6501	A										
A6502	A										
A6503	A										
A6504	A										
A6505	A										
A6506	A										
A6507	A										
A6508	A										
A6509	A										
A6510	A										
A6511	A										
A6512	A										
A6513	B										
A6530	E										
A6531	A										
A6532	A										
A6533	E										
A6534	E										
A6535	E										
A6536	E										
A6537	E										
A6538	E										
A6539	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A6540	E										
A6541	E										
A6542	E										
A6543	E										
A6544	E										
A6549	E										
A6550	Y										
A7000	Y										
A7001	Y										
A7002	Y										
A7003	Y										
A7004	Y										
A7005	Y										
A7006	Y										
A7007	Y										
A7008	Y										
A7009	Y										
A7010	Y										
A7011	Y										
A7012	Y										
A7013	Y										
A7014	Y										
A7015	Y										
A7016	Y										
A7017	Y										
A7018	Y										
A7025	Y										
A7026	Y										
A7027	Y										
A7028	Y										
A7029	Y										
A7030	Y										
A7031	Y										
A7032	Y										
A7033	Y										
A7034	Y										
A7035	Y										
A7036	Y										
A7037	Y										
A7038	Y										
A7039	Y										
A7040	A										
A7041	A										
A7042	A										
A7043	A										
A7044	Y										
A7045	Y										
A7046	Y										
A7501	A										
A7502	A										
A7503	A										
A7504	A										
A7505	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A7506	A										
A7507	A										
A7508	A										
A7509	A										
A7520	A										
A7521	A										
A7522	A										
A7523	A										
A7524	A										
A7525	A										
A7526	A										
A7527	A										
A8000	Y										
A8001	Y										
A8002	Y										
A8003	Y										
A8004	Y										
A9150	B										
A9152	E										
A9153	E										
A9155	B										
A9180	E										
A9270	E										
A9274	E										
A9275	E										
A9276	E										
A9277	E										
A9278	E										
A9279	E										
A9280	E										
A9281	E										
A9282	E										
A9283	E										
A9300	E										
A9500	N										
A9501	N										
A9502	N										
A9503	N										
A9504	N										
A9505	N										
A9507	N										
A9508	N										
A9509	N										
A9510	N										
A9512	N										
A9516	N										
A9517	K	1064									
A9521	N										
A9524	N										
A9526	N										
A9527	K	2632									
A9528	N										
A9529	N										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
A9530	K	1150									
A9531	N										
A9532	N										
A9535	N										
A9536	N										
A9537	N										
A9538	N										
A9539	N										
A9540	N										
A9541	N										
A9542	N										
A9543	K	1643									
A9544	N										
A9545	K	1645									
A9546	N										
A9547	N										
A9548	N										
A9550	N										
A9551	N										
A9552	N										
A9553	N										
A9554	N										
A9555	N										
A9556	N										
A9557	N										
A9558	N										
A9559	N										
A9560	N										
A9561	N										
A9562	N										
A9563	K	1675									
A9564	K	1676									
A9565	D										
A9566	N										
A9567	N										
A9568	N										
A9569	N										
A9570	N										
A9571	N										
A9572	N										
A9576	N										
A9577	N										
A9578	N										
A9579	N										
A9600	K	0701									
A9605	K	0702									
A9698	N										
A9699	N										
A9700	B										
A9900	Y										
A9901	A										
A9999	Y										
B4034	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
B4035	Y										
B4036	Y										
B4081	Y										
B4082	Y										
B4083	Y										
B4086	D										
B4087	A										
B4088	A										
B4100	E										
B4102	Y										
B4103	Y										
B4104	E										
B4149	Y										
B4150	Y										
B4152	Y										
B4153	Y										
B4154	Y										
B4155	Y										
B4157	Y										
B4158	Y										
B4159	Y										
B4160	Y										
B4161	Y										
B4162	Y										
B4164	Y										
B4168	Y										
B4172	Y										
B4176	Y										
B4178	Y										
B4180	Y										
B4185	B										
B4189	Y										
B4193	Y										
B4197	Y										
B4199	Y										
B4216	Y										
B4220	Y										
B4222	Y										
B4224	Y										
B5000	Y										
B5100	Y										
B5200	Y										
B9000	Y										
B9002	Y										
B9004	Y										
B9006	Y										
B9998	Y										
B9999	Y										
C1300	S	0659									
C1713	N										
C1714	N										
C1715	N										
C1716	K	1716									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
C1717	K	1717									
C1719	K	1719									
C1721	N										
C1722	N										
C1724	N										
C1725	N										
C1726	N										
C1727	N										
C1728	N										
C1729	N										
C1730	N										
C1731	N										
C1732	N										
C1733	N										
C1750	N										
C1751	N										
C1752	N										
C1753	N										
C1754	N										
C1755	N										
C1756	N										
C1757	N										
C1758	N										
C1759	N										
C1760	N										
C1762	N										
C1763	N										
C1764	N										
C1765	N										
C1766	N										
C1767	N										
C1768	N										
C1769	N										
C1770	N										
C1771	N										
C1772	N										
C1773	N										
C1776	N										
C1777	N										
C1778	N										
C1779	N										
C1780	N										
C1781	N										
C1782	N										
C1783	N										
C1784	N										
C1785	N										
C1786	N										
C1787	N										
C1788	N										
C1789	N										
C1813	N										
C1814	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
C1815	N										
C1816	N										
C1817	N										
C1818	N										
C1819	N										
C1820	N										
C1821	H	1821									
C1874	N										
C1875	N										
C1876	N										
C1877	N										
C1878	N										
C1879	N										
C1880	N										
C1881	N										
C1882	N										
C1883	N										
C1884	N										
C1885	N										
C1887	N										
C1888	N										
C1891	N										
C1892	N										
C1893	N										
C1894	N										
C1895	N										
C1896	N										
C1897	N										
C1898	N										
C1899	N										
C1900	N										
C2614	N										
C2615	N										
C2616	K	2616									
C2617	N										
C2618	N										
C2619	N										
C2620	N										
C2621	N										
C2622	N										
C2625	N										
C2626	N										
C2627	N										
C2628	N										
C2629	N										
C2630	N										
C2631	N										
C2634	K	2634									
C2635	K	2635									
C2636	K	2636									
C2637	B										
C2638	K	2638									
C2639	K	2639									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
C2640	K	2640							
C2641	K	2641							
C2642	K	2642							
C2643	K	2643							
C2698	K	2698							
C2699	K	2699							
C8900	S	0284							
C8901	S	0336							
C8902	S	0337							
C8903	S	0284							
C8904	S	0336							
C8905	S	0337							
C8906	S	0284							
C8907	S	0336							
C8908	S	0337							
C8909	S	0284							
C8910	S	0336							
C8911	S	0337							
C8912	S	0284							
C8913	S	0336							
C8914	S	0337							
C8918	S	0284							
C8919	S	0336							
C8920	S	0337							
C8921	S	0128							
C8922	S	0128							
C8923	S	0128							
C8924	S	0128							
C8925	S	0128							
C8926	S	0128							
C8927	S	0128							
C8928	S	0128							
C8957	S	0441							
C9003	K	9003							
C9113	N								
C9121	K	9121							
C9232	D								
C9233	D								
C9234	D								
C9235	D								
C9236	D								
C9238	K	9238							
C9239	G	1168							
C9350	D								
C9351	D								
C9352	G	9350							
C9353	G	1169							
C9399	A								
C9716	T	0150							
C9723	S	1502							
C9724	T	0422							
C9725	S	1507							
C9726	S	1508							

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
C9727	S	1510									
C9728	T	0156									
D0120	E										
D0140	E										
D0145	E										
D0150	S	0330									
D0160	E										
D0170	E										
D0180	E										
D0210	E										
D0220	E										
D0230	E										
D0240	S	0330									
D0250	S	0330									
D0260	S	0330									
D0270	S	0330									
D0272	S	0330									
D0273	E										
D0274	S	0330									
D0277	S	0330									
D0290	E										
D0310	E										
D0320	E										
D0321	E										
D0322	E										
D0330	E										
D0340	E										
D0350	E										
D0360	E										
D0362	E										
D0363	E										
D0415	E										
D0416	B										
D0421	B										
D0425	E										
D0431	B										
D0460	S	0330									
D0470	E										
D0472	B										
D0473	B										
D0474	B										
D0475	B										
D0476	B										
D0477	B										
D0478	B										
D0479	B										
D0480	B										
D0481	B										
D0482	B										
D0483	B										
D0484	B										
D0485	B										
D0486	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D0502	B										
D0999	B										
D1110	E										
D1120	E										
D1203	E										
D1204	E										
D1206	E										
D1310	E										
D1320	E										
D1330	E										
D1351	E										
D1510	S	0330									
D1515	S	0330									
D1520	S	0330									
D1525	S	0330									
D1550	S	0330									
D1555	E										
D2140	E										
D2150	E										
D2160	E										
D2161	E										
D2330	E										
D2331	E										
D2332	E										
D2335	E										
D2390	E										
D2391	E										
D2392	E										
D2393	E										
D2394	E										
D2410	E										
D2420	E										
D2430	E										
D2510	E										
D2520	E										
D2530	E										
D2542	E										
D2543	E										
D2544	E										
D2610	E										
D2620	E										
D2630	E										
D2642	E										
D2643	E										
D2644	E										
D2650	E										
D2651	E										
D2652	E										
D2662	E										
D2663	E										
D2664	E										
D2710	E										
D2712	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D2720	E										
D2721	E										
D2722	E										
D2740	E										
D2750	E										
D2751	E										
D2752	E										
D2780	E										
D2781	E										
D2782	E										
D2783	E										
D2790	E										
D2791	E										
D2792	E										
D2794	E										
D2799	E										
D2910	E										
D2915	E										
D2920	E										
D2930	E										
D2931	E										
D2932	E										
D2933	E										
D2934	E										
D2940	E										
D2950	E										
D2951	E										
D2952	E										
D2953	E										
D2954	E										
D2955	E										
D2957	E										
D2960	E										
D2961	E										
D2962	E										
D2970	E										
D2971	E										
D2975	E										
D2980	E										
D2999	S	0330									
D3110	E										
D3120	E										
D3220	E										
D3221	E										
D3230	E										
D3240	E										
D3310	E										
D3320	E										
D3330	E										
D3331	E										
D3332	E										
D3333	E										
D3346	E										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D3347	E										
D3348	E										
D3351	E										
D3352	E										
D3353	E										
D3410	E										
D3421	E										
D3425	E										
D3426	E										
D3430	E										
D3450	E										
D3460	S	0330									
D3470	E										
D3910	E										
D3920	E										
D3950	E										
D3999	S	0330									
D4210	E										
D4211	E										
D4230	E										
D4231	E										
D4240	E										
D4241	E										
D4245	E										
D4249	E										
D4260	S	0330									
D4261	E										
D4263	S	0330									
D4264	S	0330									
D4265	E										
D4266	E										
D4267	E										
D4268	S	0330									
D4270	S	0330									
D4271	S	0330									
D4273	S	0330									
D4274	E										
D4275	E										
D4276	E										
D4320	E										
D4321	E										
D4341	E										
D4342	E										
D4355	S	0330									
D4381	S	0330									
D4910	E										
D4920	E										
D4999	E										
D5110	E										
D5120	E										
D5130	E										
D5140	E										
D5211	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D5212	E										
D5213	E										
D5214	E										
D5225	E										
D5226	E										
D5281	E										
D5410	E										
D5411	E										
D5421	E										
D5422	E										
D5510	E										
D5520	E										
D5610	E										
D5620	E										
D5630	E										
D5640	E										
D5650	E										
D5660	E										
D5670	E										
D5671	E										
D5710	E										
D5711	E										
D5720	E										
D5721	E										
D5730	E										
D5731	E										
D5740	E										
D5741	E										
D5750	E										
D5751	E										
D5760	E										
D5761	E										
D5810	E										
D5811	E										
D5820	E										
D5821	E										
D5850	E										
D5851	E										
D5860	E										
D5861	E										
D5862	E										
D5867	E										
D5875	E										
D5899	E										
D5911	S	0330									
D5912	S	0330									
D5913	E										
D5914	E										
D5915	E										
D5916	E										
D5919	E										
D5922	E										
D5923	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D5924	E										
D5925	E										
D5926	E										
D5927	E										
D5928	E										
D5929	E										
D5931	E										
D5932	E										
D5933	E										
D5934	E										
D5935	E										
D5936	E										
D5937	E										
D5951	E										
D5952	E										
D5953	E										
D5954	E										
D5955	E										
D5958	E										
D5959	E										
D5960	E										
D5982	E										
D5983	S	0330									
D5984	S	0330									
D5985	S	0330									
D5986	E										
D5987	S	0330									
D5988	E										
D5999	E										
D6010	E										
D6012	E										
D6040	E										
D6050	E										
D6053	E										
D6054	E										
D6055	E										
D6056	E										
D6057	E										
D6058	E										
D6059	E										
D6060	E										
D6061	E										
D6062	E										
D6063	E										
D6064	E										
D6065	E										
D6066	E										
D6067	E										
D6068	E										
D6069	E										
D6070	E										
D6071	E										
D6072	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
D6073	E											
D6074	E											
D6075	E											
D6076	E											
D6077	E											
D6078	E											
D6079	E											
D6080	E											
D6090	E											
D6091	E											
D6092	E											
D6093	E											
D6094	E											
D6095	E											
D6100	E											
D6190	E											
D6194	E											
D6199	E											
D6205	E											
D6210	E											
D6211	E											
D6212	E											
D6214	E											
D6240	E											
D6241	E											
D6242	E											
D6245	E											
D6250	E											
D6251	E											
D6252	E											
D6253	E											
D6545	E											
D6548	E											
D6600	E											
D6601	E											
D6602	E											
D6603	E											
D6604	E											
D6605	E											
D6606	E											
D6607	E											
D6608	E											
D6609	E											
D6610	E											
D6611	E											
D6612	E											
D6613	E											
D6614	E											
D6615	E											
D6624	E											
D6634	E											
D6710	E											
D6720	E											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D6721	E										
D6722	E										
D6740	E										
D6750	E										
D6751	E										
D6752	E										
D6780	E										
D6781	E										
D6782	E										
D6783	E										
D6790	E										
D6791	E										
D6792	E										
D6793	E										
D6794	E										
D6920	S	0330									
D6930	E										
D6940	E										
D6950	E										
D6970	E										
D6972	E										
D6973	E										
D6975	E										
D6976	E										
D6977	E										
D6980	E										
D6985	E										
D6999	E										
D7111	S	0330									
D7140	S	0330									
D7210	S	0330									
D7220	S	0330									
D7230	S	0330									
D7240	S	0330									
D7241	S	0330									
D7250	S	0330									
D7260	S	0330									
D7261	S	0330									
D7270	E										
D7272	E										
D7280	E										
D7282	E										
D7283	B										
D7285	E										
D7286	E										
D7287	E										
D7288	B										
D7290	E										
D7291	S	0330									
D7292	E										
D7293	E										
D7294	E										
D7310	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D7311	E										
D7320	E										
D7321	B										
D7340	E										
D7350	E										
D7410	E										
D7411	E										
D7412	E										
D7413	E										
D7414	E										
D7415	E										
D7440	E										
D7441	E										
D7450	E										
D7451	E										
D7460	E										
D7461	E										
D7465	E										
D7471	E										
D7472	E										
D7473	E										
D7485	E										
D7490	E										
D7510	E										
D7511	B										
D7520	E										
D7521	B										
D7530	E										
D7540	E										
D7550	E										
D7560	E										
D7610	E										
D7620	E										
D7630	E										
D7640	E										
D7650	E										
D7660	E										
D7670	E										
D7671	E										
D7680	E										
D7710	E										
D7720	E										
D7730	E										
D7740	E										
D7750	E										
D7760	E										
D7770	E										
D7771	E										
D7780	E										
D7810	E										
D7820	E										
D7830	E										
D7840	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D7850	E										
D7852	E										
D7854	E										
D7856	E										
D7858	E										
D7860	E										
D7865	E										
D7870	E										
D7871	E										
D7872	E										
D7873	E										
D7874	E										
D7875	E										
D7876	E										
D7877	E										
D7880	E										
D7899	E										
D7910	E										
D7911	E										
D7912	E										
D7920	E										
D7940	S	0330									
D7941	E										
D7943	E										
D7944	E										
D7945	E										
D7946	E										
D7947	E										
D7948	E										
D7949	E										
D7950	E										
D7951	E										
D7953	E										
D7955	E										
D7960	E										
D7963	E										
D7970	E										
D7971	E										
D7972	E										
D7980	E										
D7981	E										
D7982	E										
D7983	E										
D7990	E										
D7991	E										
D7995	E										
D7996	E										
D7997	E										
D7998	E										
D7999	E										
D8010	E										
D8020	E										
D8030	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
D8040	E										
D8050	E										
D8060	E										
D8070	E										
D8080	E										
D8090	E										
D8210	E										
D8220	E										
D8660	E										
D8670	E										
D8680	E										
D8690	E										
D8691	E										
D8692	E										
D8693	E										
D8999	E										
D9110	N										
D9120	E										
D9210	E										
D9211	E										
D9212	E										
D9215	E										
D9220	E										
D9221	E										
D9230	N										
D9241	E										
D9242	E										
D9248	N										
D9310	E										
D9410	E										
D9420	E										
D9430	E										
D9440	E										
D9450	E										
D9610	E										
D9612	E										
D9630	S	0330									
D9910	E										
D9911	E										
D9920	E										
D9930	S	0330									
D9940	S	0330									
D9941	E										
D9942	E										
D9950	S	0330									
D9951	S	0330									
D9952	S	0330									
D9970	E										
D9971	E										
D9972	E										
D9973	E										
D9974	E										
D9999	E										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
E0100	Y											
E0105	Y											
E0110	Y											
E0111	Y											
E0112	Y											
E0113	Y											
E0114	Y											
E0116	Y											
E0117	Y											
E0118	E											
E0130	Y											
E0135	Y											
E0140	Y											
E0141	Y											
E0143	Y											
E0144	Y											
E0147	Y											
E0148	Y											
E0149	Y											
E0153	Y											
E0154	Y											
E0155	Y											
E0156	Y											
E0157	Y											
E0158	Y											
E0159	Y											
E0160	Y											
E0161	Y											
E0162	Y											
E0163	Y											
E0165	Y											
E0167	Y											
E0168	Y											
E0170	Y											
E0171	Y											
E0172	E											
E0175	Y											
E0181	Y											
E0182	Y											
E0184	Y											
E0185	Y											
E0186	Y											
E0187	Y											
E0188	Y											
E0189	Y											
E0190	E											
E0191	Y											
E0193	Y											
E0194	Y											
E0196	Y											
E0197	Y											
E0198	Y											
E0199	Y											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E0200	Y										
E0202	Y										
E0203	E										
E0205	Y										
E0210	Y										
E0215	Y										
E0217	Y										
E0218	Y										
E0220	Y										
E0221	Y										
E0225	Y										
E0230	Y										
E0231	E										
E0232	E										
E0235	Y										
E0236	Y										
E0238	Y										
E0239	Y										
E0240	E										
E0241	E										
E0242	E										
E0243	E										
E0244	E										
E0245	E										
E0246	E										
E0247	E										
E0248	E										
E0249	Y										
E0250	E										
E0251	E										
E0255	E										
E0256	E										
E0260	E										
E0261	E										
E0265	E										
E0266	E										
E0270	E										
E0271	E										
E0272	E										
E0273	E										
E0274	E										
E0275	Y										
E0276	Y										
E0277	Y										
E0280	Y										
E0290	E										
E0291	Y										
E0292	E										
E0293	Y										
E0294	E										
E0295	Y										
E0296	E										
E0297	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E0300	Y										
E0301	Y										
E0302	Y										
E0303	E										
E0304	E										
E0305	E										
E0310	E										
E0315	E										
E0316	Y										
E0325	Y										
E0326	Y										
E0328	Y										
E0329	Y										
E0350	E										
E0352	E										
E0370	E										
E0371	Y										
E0372	Y										
E0373	Y										
E0424	Y										
E0425	E										
E0430	E										
E0431	Y										
E0434	Y										
E0435	E										
E0439	Y										
E0440	E										
E0441	Y										
E0442	Y										
E0443	Y										
E0444	Y										
E0445	A										
E0450	Y										
E0455	Y										
E0457	Y										
E0459	Y										
E0460	Y										
E0461	Y										
E0462	Y										
E0463	Y										
E0464	Y										
E0470	Y										
E0471	Y										
E0472	Y										
E0480	Y										
E0481	E										
E0482	Y										
E0483	Y										
E0484	Y										
E0485	Y										
E0486	Y										
E0500	Y										
E0550	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E0555	Y										
E0560	Y										
E0561	Y										
E0562	Y										
E0565	Y										
E0570	Y										
E0571	Y										
E0572	Y										
E0574	Y										
E0575	Y										
E0580	Y										
E0585	Y										
E0600	Y										
E0601	Y										
E0602	Y										
E0603	A										
E0604	A										
E0605	Y										
E0606	Y										
E0607	Y										
E0610	Y										
E0615	Y										
E0616	N										
E0617	Y										
E0618	A										
E0619	A										
E0620	Y										
E0621	Y										
E0625	E										
E0627	Y										
E0628	Y										
E0629	Y										
E0630	Y										
E0635	Y										
E0636	Y										
E0637	E										
E0638	E										
E0639	E										
E0640	E										
E0641	E										
E0642	E										
E0650	Y										
E0651	Y										
E0652	Y										
E0655	Y										
E0660	Y										
E0665	Y										
E0666	Y										
E0667	Y										
E0668	Y										
E0669	Y										
E0671	Y										
E0672	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E0673	Y										
E0675	Y										
E0676	Y										
E0691	Y										
E0692	Y										
E0693	Y										
E0694	Y										
E0700	E										
E0705	B										
E0710	E										
E0720	Y										
E0730	Y										
E0731	Y										
E0740	Y										
E0744	Y										
E0745	Y										
E0746	A										
E0747	Y										
E0748	Y										
E0749	N										
E0755	E										
E0760	Y										
E0761	E										
E0762	B										
E0764	Y										
E0765	Y										
E0769	B										
E0776	Y										
E0779	Y										
E0780	Y										
E0781	Y										
E0782	N										
E0783	N										
E0784	Y										
E0785	N										
E0786	N										
E0791	Y										
E0830	N										
E0840	Y										
E0849	Y										
E0850	Y										
E0855	Y										
E0856	Y										
E0860	Y										
E0870	Y										
E0880	Y										
E0890	Y										
E0900	Y										
E0910	Y										
E0911	Y										
E0912	Y										
E0920	Y										
E0930	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E0935	Y										
E0936	E										
E0940	Y										
E0941	Y										
E0942	Y										
E0944	Y										
E0945	Y										
E0946	Y										
E0947	Y										
E0948	Y										
E0950	A										
E0951	A										
E0952	A										
E0955	Y										
E0956	Y										
E0957	Y										
E0958	A										
E0959	B										
E0960	Y										
E0961	B										
E0966	B										
E0967	Y										
E0968	Y										
E0969	Y										
E0970	E										
E0971	B										
E0973	B										
E0974	B										
E0978	B										
E0980	Y										
E0981	Y										
E0982	Y										
E0983	Y										
E0984	Y										
E0985	Y										
E0986	Y										
E0990	B										
E0992	B										
E0994	Y										
E0995	B										
E1002	Y										
E1003	Y										
E1004	Y										
E1005	Y										
E1006	Y										
E1007	Y										
E1008	Y										
E1009	Y										
E1010	Y										
E1011	Y										
E1014	Y										
E1015	Y										
E1016	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E1017	Y										
E1018	Y										
E1020	Y										
E1028	Y										
E1029	Y										
E1030	Y										
E1031	Y										
E1035	Y										
E1037	Y										
E1038	Y										
E1039	Y										
E1050	A										
E1060	A										
E1070	A										
E1083	A										
E1084	A										
E1085	E										
E1086	E										
E1087	A										
E1088	A										
E1089	E										
E1090	E										
E1092	A										
E1093	A										
E1100	A										
E1110	A										
E1130	E										
E1140	E										
E1150	Y										
E1160	A										
E1161	A										
E1170	A										
E1171	A										
E1172	A										
E1180	A										
E1190	A										
E1195	A										
E1200	A										
E1220	A										
E1221	A										
E1222	A										
E1223	A										
E1224	A										
E1225	Y										
E1226	B										
E1227	Y										
E1228	Y										
E1229	Y										
E1230	Y										
E1231	Y										
E1232	Y										
E1233	Y										
E1234	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E1235	Y										
E1236	Y										
E1237	Y										
E1238	Y										
E1239	Y										
E1240	A										
E1250	E										
E1260	E										
E1270	A										
E1280	A										
E1285	E										
E1290	E										
E1295	A										
E1296	Y										
E1297	Y										
E1298	Y										
E1300	E										
E1310	Y										
E1340	Y										
E1353	Y										
E1355	Y										
E1372	Y										
E1390	Y										
E1391	Y										
E1392	Y										
E1399	Y										
E1405	Y										
E1406	Y										
E1500	A										
E1510	A										
E1520	A										
E1530	A										
E1540	A										
E1550	A										
E1560	A										
E1570	A										
E1575	A										
E1580	A										
E1590	A										
E1592	A										
E1594	A										
E1600	A										
E1610	A										
E1615	A										
E1620	A										
E1625	A										
E1630	A										
E1632	A										
E1634	B										
E1635	A										
E1636	A										
E1637	A										
E1639	A										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E1699	A										
E1700	Y										
E1701	Y										
E1702	Y										
E1800	Y										
E1801	Y										
E1802	Y										
E1805	Y										
E1806	Y										
E1810	Y										
E1811	Y										
E1812	Y										
E1815	Y										
E1816	Y										
E1818	Y										
E1820	Y										
E1821	Y										
E1825	Y										
E1830	Y										
E1840	Y										
E1841	Y										
E1902	A										
E2000	Y										
E2100	Y										
E2101	Y										
E2120	Y										
E2201	Y										
E2202	Y										
E2203	Y										
E2204	Y										
E2205	Y										
E2206	Y										
E2207	Y										
E2208	Y										
E2209	Y										
E2210	Y										
E2211	Y										
E2212	Y										
E2213	Y										
E2214	Y										
E2215	Y										
E2216	Y										
E2217	Y										
E2218	Y										
E2219	Y										
E2220	Y										
E2221	Y										
E2222	Y										
E2223	Y										
E2224	Y										
E2225	Y										
E2226	Y										
E2227	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E2228	Y										
E2291	Y										
E2292	Y										
E2293	Y										
E2294	Y										
E2300	Y										
E2301	Y										
E2310	Y										
E2311	Y										
E2312	Y										
E2313	Y										
E2321	Y										
E2322	Y										
E2323	Y										
E2324	Y										
E2325	Y										
E2326	Y										
E2327	Y										
E2328	Y										
E2329	Y										
E2330	Y										
E2331	Y										
E2340	Y										
E2341	Y										
E2342	Y										
E2343	Y										
E2351	Y										
E2360	Y										
E2361	Y										
E2362	Y										
E2363	Y										
E2364	Y										
E2365	Y										
E2366	Y										
E2367	Y										
E2368	Y										
E2369	Y										
E2370	Y										
E2371	Y										
E2372	Y										
E2373	Y										
E2374	Y										
E2375	Y										
E2376	Y										
E2377	Y										
E2381	Y										
E2382	Y										
E2383	Y										
E2384	Y										
E2385	Y										
E2386	Y										
E2387	Y										
E2388	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
E2389	Y										
E2390	Y										
E2391	Y										
E2392	Y										
E2393	Y										
E2394	Y										
E2395	Y										
E2396	Y										
E2397	Y										
E2399	Y										
E2402	Y										
E2500	Y										
E2502	Y										
E2504	Y										
E2506	Y										
E2508	Y										
E2510	Y										
E2511	Y										
E2512	Y										
E2599	Y										
E2601	Y										
E2602	Y										
E2603	Y										
E2604	Y										
E2605	Y										
E2606	Y										
E2607	Y										
E2608	Y										
E2609	Y										
E2610	B										
E2611	Y										
E2612	Y										
E2613	Y										
E2614	Y										
E2615	Y										
E2616	Y										
E2617	Y										
E2618	D										
E2619	Y										
E2620	Y										
E2621	Y										
E8000	E										
E8001	E										
E8002	E										
G0008	S	0350									
G0009	S	0350									
G0010	B										
G0027	A										
G0101	V	0604									
G0102	N										
G0103	A										
G0104	S	0159									
G0105	T	0158									

<b>(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS</b>											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
G0106	S	0157									
G0108	A										
G0109	A										
G0117	S	0698									
G0118	S	0230									
G0120	S	0157									
G0121	T	0158									
G0122	E										
G0123	A										
G0124	B										
G0127	T	0013									
G0128	B										
G0129	P	0033									
G0130	X	0260									
G0141	B										
G0143	A										
G0144	A										
G0145	A										
G0147	A										
G0148	A										
G0151	B										
G0152	B										
G0153	B										
G0154	B										
G0155	B										
G0156	B										
G0166	T	0678									
G0168	B										
G0173	S	0067									
G0175	V	0608									
G0176	P	0033									
G0177	N										
G0179	M										
G0180	M										
G0181	M										
G0182	M										
G0186	T	0235									
G0202	A										
G0204	A										
G0206	A										
G0219	E										
G0235	E										
G0237	S	0077									
G0238	S	0077									
G0239	S	0077									
G0245	V	0604									
G0246	V	0605									
G0247	T	0013									
G0248	V	0607									
G0249	V	0607									
G0250	M										
G0251	S	0065									
G0252	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
G0255	E										
G0257	S	0170									
G0259	N										
G0260	T	0207									
G0265	D										
G0266	D										
G0267	D										
G0268	N										
G0269	N										
G0270	A										
G0271	A										
G0275	N										
G0278	N										
G0281	A										
G0282	E										
G0283	A										
G0288	N										
G0289	N										
G0290	T	0656									
G0291	T	0656									
G0293	X	0340									
G0294	X	0340									
G0295	E										
G0297	D										
G0298	D										
G0299	D										
G0300	D										
G0302	S	0209									
G0303	S	0209									
G0304	S	0213									
G0305	S	0213									
G0306	A										
G0307	A										
G0308	B										
G0309	B										
G0310	B										
G0311	B										
G0312	B										
G0313	B										
G0314	B										
G0315	B										
G0316	B										
G0317	B										
G0318	B										
G0319	B										
G0320	B										
G0321	B										
G0322	B										
G0323	B										
G0324	B										
G0325	B										
G0326	B										
G0327	B										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
G0328	A										
G0329	A										
G0332	S	0430									
G0333	M										
G0337	B										
G0339	S	0067									
G0340	S	0066									
G0341	C										
G0342	C										
G0343	C										
G0344	V	0605									
G0364	T	0002									
G0365	S	0267									
G0366	B										
G0367	S	0099									
G0368	M										
G0372	M										
G0375	D										
G0376	D										
G0377	S	0437									
G0378	N										
G0379	Q	0604									
G0380	V	0604									
G0381	V	0605									
G0382	V	0606									
G0383	V	0607									
G0384	V	0608									
G0389	S	0266									
G0390	S	0618									
G0392	T	0083									
G0393	T	0083									
G0394	A										
G0396	S	0432									
G0397	S	0432									
G3001	S	0442									
G8006	M										
G8007	M										
G8008	M										
G8009	M										
G8010	M										
G8011	M										
G8012	M										
G8013	M										
G8014	M										
G8015	M										
G8016	M										
G8017	M										
G8018	M										
G8019	M										
G8020	M										
G8021	M										
G8022	M										
G8023	M										

<b>(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS</b>											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
G8024	M										
G8025	M										
G8026	M										
G8027	M										
G8028	M										
G8029	M										
G8030	M										
G8031	M										
G8032	M										
G8033	M										
G8034	M										
G8035	M										
G8036	M										
G8037	M										
G8038	M										
G8039	M										
G8040	M										
G8041	M										
G8051	M										
G8052	M										
G8053	M										
G8054	M										
G8055	M										
G8056	M										
G8057	M										
G8058	M										
G8059	M										
G8060	M										
G8061	M										
G8062	M										
G8075	M										
G8076	M										
G8077	M										
G8078	M										
G8079	M										
G8080	M										
G8081	M										
G8082	M										
G8085	M										
G8093	M										
G8094	M										
G8099	M										
G8100	M										
G8103	M										
G8104	M										
G8106	M										
G8107	M										
G8108	M										
G8109	M										
G8110	M										
G8111	M										
G8112	M										
G8113	M										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
G8114	M										
G8115	M										
G8116	M										
G8117	M										
G8126	M										
G8127	M										
G8128	M										
G8129	M										
G8130	M										
G8131	M										
G8152	M										
G8153	M										
G8154	M										
G8155	M										
G8156	M										
G8157	M										
G8159	M										
G8162	M										
G8164	M										
G8165	M										
G8166	M										
G8167	M										
G8170	M										
G8171	M										
G8172	M										
G8182	M										
G8183	M										
G8184	M										
G8185	M										
G8186	M										
G8193	M										
G8196	M										
G8200	M										
G8204	M										
G8209	M										
G8214	M										
G8217	M										
G8219	M										
G8220	M										
G8221	M										
G8223	M										
G8226	M										
G8231	M										
G8234	M										
G8238	M										
G8240	M										
G8243	M										
G8246	M										
G8248	M										
G8251	M										
G8254	M										
G8257	M										
G8260	M										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
G8263	M										
G8266	M										
G8268	M										
G8271	M										
G8274	M										
G8276	M										
G8279	M										
G8282	M										
G8285	M										
G8289	M										
G8293	M										
G8296	M										
G8298	M										
G8299	M										
G8302	M										
G8303	M										
G8304	M										
G8305	M										
G8306	M										
G8307	M										
G8308	M										
G8310	M										
G8314	M										
G8318	M										
G8322	M										
G8326	M										
G8330	M										
G8334	M										
G8338	M										
G8341	M										
G8345	M										
G8351	M										
G8354	M										
G8357	M										
G8360	M										
G8362	M										
G8365	M										
G8367	M										
G8370	M										
G8371	M										
G8372	M										
G8373	M										
G8374	M										
G8375	M										
G8376	M										
G8377	M										
G8378	M										
G8379	M										
G8380	M										
G8381	M										
G8382	M										
G8383	M										
G8384	M										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
G8385	M											
G8386	M											
G8387	M											
G8388	M											
G8389	M											
G8390	M											
G8391	M											
G8395	M											
G8396	M											
G8397	M											
G8398	M											
G8399	M											
G8400	M											
G8401	M											
G8402	M											
G8403	M											
G8404	M											
G8405	M											
G8406	M											
G8407	M											
G8408	M											
G8409	M											
G8410	M											
G8415	M											
G8416	M											
G8417	M											
G8418	M											
G8419	M											
G8420	M											
G8421	M											
G8422	M											
G8423	M											
G8424	M											
G8425	M											
G8426	M											
G8427	M											
G8428	M											
G8429	M											
G8430	M											
G8431	M											
G8432	M											
G8433	M											
G8434	M											
G8435	M											
G8436	M											
G8437	M											
G8438	M											
G8439	M											
G8440	M											
G8441	M											
G8442	M											
G8443	M											
G8445	M											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
G8446	M											
G8447	M											
G8448	M											
G8449	M											
G8450	M											
G8451	M											
G8452	M											
G8453	M											
G8454	M											
G8455	M											
G8456	M											
G8457	M											
G8458	M											
G8459	M											
G8460	M											
G8461	M											
G8462	M											
G8463	M											
G8464	M											
G8465	M											
G8466	M											
G8467	M											
G8468	M											
G8469	M											
G8470	M											
G8471	M											
G8472	M											
G8473	M											
G8474	M											
G8475	M											
G8476	M											
G8477	M											
G8478	M											
G8479	M											
G8480	M											
G8481	M											
G8482	M											
G8483	M											
G8484	M											
G9001	B											
G9002	B											
G9003	B											
G9004	B											
G9005	B											
G9006	B											
G9007	B											
G9008	B											
G9009	B											
G9010	B											
G9011	B											
G9012	B											
G9013	E											
G9014	E											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
G9016	E										
G9017	A										
G9018	A										
G9019	A										
G9020	A										
G9033	A										
G9034	A										
G9035	A										
G9036	A										
G9041	A										
G9042	A										
G9043	A										
G9044	A										
G9050	E										
G9051	E										
G9052	E										
G9053	E										
G9054	E										
G9055	E										
G9056	E										
G9057	E										
G9058	E										
G9059	E										
G9060	E										
G9061	E										
G9062	E										
G9063	M										
G9064	M										
G9065	M										
G9066	M										
G9067	M										
G9068	M										
G9069	M										
G9070	M										
G9071	M										
G9072	M										
G9073	M										
G9074	M										
G9075	M										
G9077	M										
G9078	M										
G9079	M										
G9080	M										
G9083	M										
G9084	M										
G9085	M										
G9086	M										
G9087	M										
G9088	M										
G9089	M										
G9090	M										
G9091	M										
G9092	M										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
G9093	M										
G9094	M										
G9095	M										
G9096	M										
G9097	M										
G9098	M										
G9099	M										
G9100	M										
G9101	M										
G9102	M										
G9103	M										
G9104	M										
G9105	M										
G9106	M										
G9107	M										
G9108	M										
G9109	M										
G9110	M										
G9111	M										
G9112	M										
G9113	M										
G9114	M										
G9115	M										
G9116	M										
G9117	M										
G9123	M										
G9124	M										
G9125	M										
G9126	M										
G9128	M										
G9129	M										
G9130	M										
G9131	M										
G9132	M										
G9133	M										
G9134	M										
G9135	M										
G9136	M										
G9137	M										
G9138	M										
G9139	M										
G9140	M										
J0120	N										
J0128	K	9216									
J0129	G	9230									
J0130	K	1605									
J0132	N										
J0133	N										
J0135	K	1083									
J0150	K	0379									
J0152	K	0917									
J0170	N										
J0180	K	9208									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J0190	K	0998									
J0200	N										
J0205	K	0900									
J0207	K	7000									
J0210	K	2210									
J0215	K	1633									
J0220	K	9234									
J0256	K	0901									
J0270	B										
J0275	B										
J0278	N										
J0280	N										
J0282	N										
J0285	N										
J0287	K	9024									
J0288	K	0735									
J0289	K	0736									
J0290	N										
J0295	N										
J0300	N										
J0330	N										
J0348	G	0760									
J0350	K	1606									
J0360	N										
J0364	N										
J0365	K	1682									
J0380	N										
J0390	N										
J0395	N										
J0400	K	1165									
J0456	N										
J0460	N										
J0470	N										
J0475	K	9032									
J0476	K	1631									
J0480	K	1683									
J0500	N										
J0515	N										
J0520	N										
J0530	N										
J0540	N										
J0550	N										
J0560	N										
J0570	N										
J0580	N										
J0583	K	3041									
J0585	K	0902									
J0587	K	9018									
J0592	N										
J0594	K	1178									
J0595	N										
J0600	K	0999									
J0610	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J0620	N										
J0630	N										
J0636	N										
J0637	K	9019									
J0640	N										
J0670	N										
J0690	N										
J0692	N										
J0694	N										
J0696	N										
J0697	N										
J0698	N										
J0702	N										
J0704	N										
J0706	N										
J0710	N										
J0713	N										
J0715	N										
J0720	N										
J0725	N										
J0735	K	0935									
J0740	K	9033									
J0743	N										
J0744	N										
J0745	N										
J0760	N										
J0770	N										
J0780	N										
J0795	K	1684									
J0800	K	1280									
J0835	K	0835									
J0850	K	0903									
J0878	K	9124									
J0881	K	1685									
J0882	A										
J0885	K	1686									
J0886	A										
J0894	G	9231									
J0895	N										
J0900	N										
J0945	N										
J0970	N										
J1000	N										
J1020	N										
J1030	N										
J1040	N										
J1051	N										
J1055	E										
J1056	E										
J1060	N										
J1070	N										
J1080	N										
J1094	N										

<b>(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS</b>											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J1100	N										
J1110	N										
J1120	N										
J1160	N										
J1162	K	1687									
J1165	N										
J1170	N										
J1180	N										
J1190	K	0726									
J1200	N										
J1205	K	0747									
J1212	N										
J1230	N										
J1240	N										
J1245	N										
J1250	N										
J1260	K	0750									
J1265	N										
J1270	N										
J1300	G	9236									
J1320	N										
J1324	K	0767									
J1325	N										
J1327	K	1607									
J1330	N										
J1335	N										
J1364	N										
J1380	N										
J1390	N										
J1410	K	9038									
J1430	K	1688									
J1435	N										
J1436	K	1436									
J1438	K	1608									
J1440	K	0728									
J1441	K	7049									
J1450	N										
J1451	K	1689									
J1452	N										
J1455	N										
J1457	K	0878									
J1458	K	9224									
J1460	K	3043									
J1470	K	0898									
J1480	K	0899									
J1490	K	0904									
J1500	K	0919									
J1510	K	0920									
J1520	K	0921									
J1530	K	0922									
J1540	K	0923									
J1550	K	0924									
J1560	K	0933									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS									
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.									
These conversion relationships are effective beginning December 1, 2008.									
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.									
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.									
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .									
HCPCS Code	SI	APC							
J1561	K	0948							
J1562	K	0804							
J1565	K	0906							
J1566	K	2731							
J1567	D								
J1568	K	0943							
J1569	K	0944							
J1570	N								
J1571	K	0946							
J1572	K	0947							
J1573	K	1138							
J1580	N								
J1590	N								
J1595	K	1015							
J1600	N								
J1610	K	9042							
J1620	K	7005							
J1626	K	0764							
J1630	N								
J1631	N								
J1640	K	1690							
J1642	N								
J1644	N								
J1645	N								
J1650	N								
J1652	K	0883							
J1655	N								
J1670	K	1670							
J1675	B								
J1700	N								
J1710	N								
J1720	N								
J1730	K	1740							
J1740	G	9229							
J1742	K	9044							
J1743	G	9232							
J1745	K	7043							
J1751	K	1691							
J1752	K	1692							
J1756	K	9046							
J1785	K	0916							
J1790	N								
J1800	N								
J1810	E								
J1815	N								
J1817	N								
J1825	E								
J1830	K	0910							
J1835	K	9047							
J1840	N								
J1850	N								
J1885	N								
J1890	N								

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J1931	K	9209									
J1940	N										
J1945	K	1693									
J1950	K	0800									
J1955	B										
J1956	N										
J1960	N										
J1980	N										
J1990	N										
J2001	N										
J2010	N										
J2020	K	9001									
J2060	N										
J2150	N										
J2170	K	0805									
J2175	N										
J2180	N										
J2185	N										
J2210	N										
J2248	G	9227									
J2250	N										
J2260	N										
J2270	N										
J2271	N										
J2275	N										
J2278	K	1694									
J2280	N										
J2300	N										
J2310	N										
J2315	K	0759									
J2320	N										
J2321	N										
J2322	N										
J2323	G	9126									
J2325	K	1695									
J2353	K	1207									
J2354	N										
J2355	K	7011									
J2357	K	9300									
J2360	N										
J2370	N										
J2400	N										
J2405	K	0768									
J2410	N										
J2425	K	1696									
J2430	K	0730									
J2440	N										
J2460	N										
J2469	K	9210									
J2501	N										
J2503	K	1697									
J2504	K	1739									
J2505	K	9119									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J2510	N										
J2513	K	0880									
J2515	N										
J2540	N										
J2543	N										
J2545	B										
J2550	N										
J2560	N										
J2590	N										
J2597	N										
J2650	N										
J2670	N										
J2675	N										
J2680	N										
J2690	N										
J2700	N										
J2710	N										
J2720	N										
J2724	K	1139									
J2725	N										
J2730	K	1023									
J2760	N										
J2765	N										
J2770	K	2770									
J2778	G	9233									
J2780	N										
J2783	K	0738									
J2788	K	9023									
J2790	K	0884									
J2791	K	0945									
J2792	K	1609									
J2794	K	9125									
J2795	N										
J2800	N										
J2805	N										
J2810	N										
J2820	K	0731									
J2850	K	1700									
J2910	N										
J2916	N										
J2920	N										
J2930	N										
J2940	K	2940									
J2941	K	7034									
J2950	N										
J2993	K	9005									
J2995	K	0911									
J2997	K	7048									
J3000	N										
J3010	N										
J3030	K	3030									
J3070	N										
J3100	K	9002									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J3105	N										
J3110	B										
J3120	N										
J3130	N										
J3140	N										
J3150	N										
J3230	N										
J3240	K	9108									
J3243	G	9228									
J3246	K	7041									
J3250	N										
J3260	N										
J3265	N										
J3280	N										
J3285	K	1701									
J3301	N										
J3302	N										
J3303	N										
J3305	K	7045									
J3310	N										
J3315	K	9122									
J3320	N										
J3350	K	9051									
J3355	K	1741									
J3360	N										
J3364	N										
J3365	K	7036									
J3370	N										
J3396	K	1203									
J3400	N										
J3410	N										
J3411	N										
J3415	N										
J3420	N										
J3430	N										
J3465	K	1052									
J3470	N										
J3471	N										
J3472	K	1703									
J3473	G	0806									
J3475	N										
J3480	N										
J3485	N										
J3486	N										
J3487	K	9115									
J3488	G	0951									
J3490	N										
J3520	E										
J3530	N										
J3535	E										
J3570	E										
J3590	N										
J7030	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J7040	N										
J7042	N										
J7050	N										
J7060	N										
J7070	N										
J7100	N										
J7110	N										
J7120	N										
J7130	N										
J7187	K	1704									
J7189	K	1705									
J7190	K	0925									
J7191	N										
J7192	K	0927									
J7193	K	0931									
J7194	K	0928									
J7195	K	0932									
J7197	K	0930									
J7198	K	0929									
J7199	B										
J7300	E										
J7302	E										
J7303	E										
J7304	E										
J7306	E										
J7307	E										
J7308	K	7308									
J7310	K	0913									
J7311	K	9225									
J7321	K	0873									
J7322	K	0874									
J7323	K	0875									
J7324	K	0877									
J7330	B										
J7340	K	1632									
J7341	N										
J7342	K	9054									
J7343	K	1629									
J7344	K	9156									
J7345	D										
J7346	K	9222									
J7347	K	1140									
J7348	G	9351									
J7349	G	1141									
J7500	N										
J7501	K	0887									
J7502	K	0888									
J7504	K	0890									
J7505	K	7038									
J7506	N										
J7507	K	0891									
J7509	N										
J7510	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J7511	K	9104									
J7513	K	1612									
J7515	N										
J7516	N										
J7517	K	9015									
J7518	K	9219									
J7520	K	9020									
J7525	K	9006									
J7599	N										
J7602	M										
J7603	M										
J7604	M										
J7605	M										
J7607	M										
J7608	M										
J7609	M										
J7610	M										
J7611	D										
J7612	D										
J7613	D										
J7614	D										
J7615	M										
J7620	M										
J7622	M										
J7624	M										
J7626	M										
J7627	M										
J7628	M										
J7629	M										
J7631	M										
J7632	M										
J7633	M										
J7634	M										
J7635	M										
J7636	M										
J7637	M										
J7638	M										
J7639	M										
J7640	E										
J7641	M										
J7642	M										
J7643	M										
J7644	M										
J7645	M										
J7647	M										
J7648	M										
J7649	M										
J7650	M										
J7657	M										
J7658	M										
J7659	M										
J7660	M										
J7667	M										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J7668	M										
J7669	M										
J7670	M										
J7674	N										
J7676	M										
J7680	M										
J7681	M										
J7682	M										
J7683	M										
J7684	M										
J7685	M										
J7699	M										
J7799	N										
J8498	B										
J8499	E										
J8501	K	0868									
J8510	K	7015									
J8515	E										
J8520	K	7042									
J8521	K	0934									
J8530	N										
J8540	N										
J8560	K	0802									
J8565	E										
J8597	N										
J8600	K	0882									
J8610	N										
J8650	K	0808									
J8700	K	1086									
J8999	B										
J9000	N										
J9001	K	7046									
J9010	K	9110									
J9015	K	0807									
J9017	K	9012									
J9020	K	0814									
J9025	K	1709									
J9027	K	1710									
J9031	K	0809									
J9035	K	9214									
J9040	K	0748									
J9041	K	9207									
J9045	K	0811									
J9050	K	0812									
J9055	K	9215									
J9060	N										
J9062	N										
J9065	K	0858									
J9070	N										
J9080	N										
J9090	N										
J9091	N										
J9092	N										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J9093	N										
J9094	N										
J9095	N										
J9096	N										
J9097	N										
J9098	K	1166									
J9100	N										
J9110	N										
J9120	K	0752									
J9130	N										
J9140	N										
J9150	K	0820									
J9151	K	0821									
J9160	K	1084									
J9165	N										
J9170	K	0823									
J9175	N										
J9178	K	1167									
J9181	N										
J9182	N										
J9185	K	0842									
J9190	N										
J9200	K	0827									
J9201	K	0828									
J9202	K	0810									
J9206	K	0830									
J9208	K	0831									
J9209	K	0732									
J9211	K	0832									
J9212	K	0912									
J9213	K	0834									
J9214	K	0836									
J9215	K	0865									
J9216	K	0838									
J9217	K	9217									
J9218	K	0861									
J9219	K	7051									
J9225	K	1711									
J9226	K	1142									
J9230	K	0751									
J9245	K	0840									
J9250	N										
J9260	N										
J9261	G	0825									
J9263	K	1738									
J9264	K	1712									
J9265	K	0863									
J9266	K	0843									
J9268	K	0844									
J9270	K	1041									
J9280	K	0862									
J9290	K	0941									
J9291	K	0942									



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
J9293	K	0864									
J9300	K	9004									
J9303	G	9235									
J9305	K	9213									
J9310	K	0849									
J9320	K	0850									
J9340	K	0851									
J9350	K	0852									
J9355	K	1613									
J9357	K	9167									
J9360	N										
J9370	N										
J9375	N										
J9380	N										
J9390	K	0855									
J9395	K	9120									
J9600	K	0856									
J9999	N										
K0001	Y										
K0002	Y										
K0003	Y										
K0004	Y										
K0005	Y										
K0006	Y										
K0007	Y										
K0009	Y										
K0010	Y										
K0011	Y										
K0012	Y										
K0014	Y										
K0015	Y										
K0017	Y										
K0018	Y										
K0019	Y										
K0020	Y										
K0037	Y										
K0038	Y										
K0039	Y										
K0040	Y										
K0041	Y										
K0042	Y										
K0043	Y										
K0044	Y										
K0045	Y										
K0046	Y										
K0047	Y										
K0050	Y										
K0051	Y										
K0052	Y										
K0053	Y										
K0056	Y										
K0065	Y										
K0069	Y										

<b>(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS</b>											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
K0070	Y										
K0071	Y										
K0072	Y										
K0073	Y										
K0077	Y										
K0098	Y										
K0105	Y										
K0108	Y										
K0195	Y										
K0455	Y										
K0462	Y										
K0552	Y										
K0553	D										
K0554	D										
K0555	D										
K0601	Y										
K0602	Y										
K0603	Y										
K0604	Y										
K0605	Y										
K0606	Y										
K0607	Y										
K0608	Y										
K0609	Y										
K0669	Y										
K0730	Y										
K0733	Y										
K0734	Y										
K0735	Y										
K0736	Y										
K0737	Y										
K0738	Y										
K0800	Y										
K0801	Y										
K0802	Y										
K0806	Y										
K0807	Y										
K0808	Y										
K0812	Y										
K0813	Y										
K0814	Y										
K0815	Y										
K0816	Y										
K0820	Y										
K0821	Y										
K0822	Y										
K0823	Y										
K0824	Y										
K0825	Y										
K0826	Y										
K0827	Y										
K0828	Y										
K0829	Y										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
K0830	Y											
K0831	Y											
K0835	Y											
K0836	Y											
K0837	Y											
K0838	Y											
K0839	Y											
K0840	Y											
K0841	Y											
K0842	Y											
K0843	Y											
K0848	Y											
K0849	Y											
K0850	Y											
K0851	Y											
K0852	Y											
K0853	Y											
K0854	Y											
K0855	Y											
K0856	Y											
K0857	Y											
K0858	Y											
K0859	Y											
K0860	Y											
K0861	Y											
K0862	Y											
K0863	Y											
K0864	Y											
K0868	Y											
K0869	Y											
K0870	Y											
K0871	Y											
K0877	Y											
K0878	Y											
K0879	Y											
K0880	Y											
K0884	Y											
K0885	Y											
K0886	Y											
K0890	Y											
K0891	Y											
K0898	Y											
K0899	Y											
L0112	A											
L0120	A											
L0130	A											
L0140	A											
L0150	A											
L0160	A											
L0170	A											
L0172	A											
L0174	A											
L0180	A											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L0190	A										
L0200	A										
L0210	A										
L0220	A										
L0430	A										
L0450	A										
L0452	A										
L0454	A										
L0456	A										
L0458	A										
L0460	A										
L0462	A										
L0464	A										
L0466	A										
L0468	A										
L0470	A										
L0472	A										
L0480	A										
L0482	A										
L0484	A										
L0486	A										
L0488	A										
L0490	A										
L0491	A										
L0492	A										
L0621	A										
L0622	A										
L0623	A										
L0624	A										
L0625	A										
L0626	A										
L0627	A										
L0628	A										
L0629	A										
L0630	A										
L0631	A										
L0632	A										
L0633	A										
L0634	A										
L0635	A										
L0636	A										
L0637	A										
L0638	A										
L0639	A										
L0640	A										
L0700	A										
L0710	A										
L0810	A										
L0820	A										
L0830	A										
L0859	A										
L0861	A										
L0960	D										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L0970	A										
L0972	A										
L0974	A										
L0976	A										
L0978	A										
L0980	A										
L0982	A										
L0984	A										
L0999	A										
L1000	A										
L1001	A										
L1005	A										
L1010	A										
L1020	A										
L1025	A										
L1030	A										
L1040	A										
L1050	A										
L1060	A										
L1070	A										
L1080	A										
L1085	A										
L1090	A										
L1100	A										
L1110	A										
L1120	A										
L1200	A										
L1210	A										
L1220	A										
L1230	A										
L1240	A										
L1250	A										
L1260	A										
L1270	A										
L1280	A										
L1290	A										
L1300	A										
L1310	A										
L1499	A										
L1500	A										
L1510	A										
L1520	A										
L1600	A										
L1610	A										
L1620	A										
L1630	A										
L1640	A										
L1650	A										
L1652	A										
L1660	A										
L1680	A										
L1685	A										
L1686	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L1690	A										
L1700	A										
L1710	A										
L1720	A										
L1730	A										
L1755	A										
L1800	A										
L1810	A										
L1815	A										
L1820	A										
L1825	A										
L1830	A										
L1831	A										
L1832	A										
L1834	A										
L1836	A										
L1840	A										
L1843	A										
L1844	A										
L1845	A										
L1846	A										
L1847	A										
L1850	A										
L1855	D										
L1858	D										
L1860	A										
L1870	D										
L1880	D										
L1900	A										
L1901	A										
L1902	A										
L1904	A										
L1906	A										
L1907	A										
L1910	A										
L1920	A										
L1930	A										
L1932	A										
L1940	A										
L1945	A										
L1950	A										
L1951	A										
L1960	A										
L1970	A										
L1971	A										
L1980	A										
L1990	A										
L2000	A										
L2005	A										
L2010	A										
L2020	A										
L2030	A										
L2034	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L2035	A										
L2036	A										
L2037	A										
L2038	A										
L2040	A										
L2050	A										
L2060	A										
L2070	A										
L2080	A										
L2090	A										
L2106	A										
L2108	A										
L2112	A										
L2114	A										
L2116	A										
L2126	A										
L2128	A										
L2132	A										
L2134	A										
L2136	A										
L2180	A										
L2182	A										
L2184	A										
L2186	A										
L2188	A										
L2190	A										
L2192	A										
L2200	A										
L2210	A										
L2220	A										
L2230	A										
L2232	A										
L2240	A										
L2250	A										
L2260	A										
L2265	A										
L2270	A										
L2275	A										
L2280	A										
L2300	A										
L2310	A										
L2320	A										
L2330	A										
L2335	A										
L2340	A										
L2350	A										
L2360	A										
L2370	A										
L2375	A										
L2380	A										
L2385	A										
L2387	A										
L2390	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L2395	A										
L2397	A										
L2405	A										
L2415	A										
L2425	A										
L2430	A										
L2492	A										
L2500	A										
L2510	A										
L2520	A										
L2525	A										
L2526	A										
L2530	A										
L2540	A										
L2550	A										
L2570	A										
L2580	A										
L2600	A										
L2610	A										
L2620	A										
L2622	A										
L2624	A										
L2627	A										
L2628	A										
L2630	A										
L2640	A										
L2650	A										
L2660	A										
L2670	A										
L2680	A										
L2750	A										
L2755	A										
L2760	A										
L2768	A										
L2770	A										
L2780	A										
L2785	A										
L2795	A										
L2800	A										
L2810	A										
L2820	A										
L2830	A										
L2840	A										
L2850	A										
L2860	A										
L2999	A										
L3000	A										
L3001	A										
L3002	A										
L3003	A										
L3010	A										
L3020	A										
L3030	A										



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L3031	A										
L3040	A										
L3050	A										
L3060	A										
L3070	A										
L3080	A										
L3090	A										
L3100	A										
L3140	A										
L3150	A										
L3160	A										
L3170	A										
L3201	A										
L3202	A										
L3203	A										
L3204	A										
L3206	A										
L3207	A										
L3208	A										
L3209	A										
L3211	A										
L3212	A										
L3213	A										
L3214	A										
L3215	E										
L3216	E										
L3217	E										
L3219	E										
L3221	E										
L3222	E										
L3224	A										
L3225	A										
L3230	A										
L3250	A										
L3251	A										
L3252	A										
L3253	A										
L3254	A										
L3255	A										
L3257	A										
L3260	E										
L3265	A										
L3300	A										
L3310	A										
L3320	A										
L3330	A										
L3332	A										
L3334	A										
L3340	A										
L3350	A										
L3360	A										
L3370	A										
L3380	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
L3390	A											
L3400	A											
L3410	A											
L3420	A											
L3430	A											
L3440	A											
L3450	A											
L3455	A											
L3460	A											
L3465	A											
L3470	A											
L3480	A											
L3485	A											
L3500	A											
L3510	A											
L3520	A											
L3530	A											
L3540	A											
L3550	A											
L3560	A											
L3570	A											
L3580	A											
L3590	A											
L3595	A											
L3600	A											
L3610	A											
L3620	A											
L3630	A											
L3640	A											
L3649	A											
L3650	A											
L3651	A											
L3652	A											
L3660	A											
L3670	A											
L3671	A											
L3672	A											
L3673	A											
L3675	A											
L3677	E											
L3700	A											
L3701	A											
L3702	A											
L3710	A											
L3720	A											
L3730	A											
L3740	A											
L3760	A											
L3762	A											
L3763	A											
L3764	A											
L3765	A											
L3766	A											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L3800	D										
L3805	D										
L3806	A										
L3807	A										
L3808	A										
L3810	D										
L3815	D										
L3820	D										
L3825	D										
L3830	D										
L3835	D										
L3840	D										
L3845	D										
L3850	D										
L3855	D										
L3860	D										
L3890	B										
L3900	A										
L3901	A										
L3904	A										
L3905	A										
L3906	A										
L3907	D										
L3908	A										
L3909	A										
L3910	D										
L3911	A										
L3912	A										
L3913	A										
L3915	A										
L3916	D										
L3917	A										
L3918	D										
L3919	A										
L3920	D										
L3921	A										
L3922	D										
L3923	A										
L3924	D										
L3925	A										
L3926	D										
L3927	A										
L3928	D										
L3929	A										
L3930	D										
L3931	A										
L3932	D										
L3933	A										
L3934	D										
L3935	A										
L3936	D										
L3938	D										
L3940	D										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L3942	D										
L3944	D										
L3946	D										
L3948	D										
L3950	D										
L3952	D										
L3954	D										
L3956	A										
L3960	A										
L3961	A										
L3962	A										
L3964	Y										
L3965	Y										
L3966	Y										
L3967	A										
L3968	Y										
L3969	Y										
L3970	Y										
L3971	A										
L3972	Y										
L3973	A										
L3974	Y										
L3975	A										
L3976	A										
L3977	A										
L3978	A										
L3980	A										
L3982	A										
L3984	A										
L3985	D										
L3986	D										
L3995	A										
L3999	A										
L4000	A										
L4002	A										
L4010	A										
L4020	A										
L4030	A										
L4040	A										
L4045	A										
L4050	A										
L4055	A										
L4060	A										
L4070	A										
L4080	A										
L4090	A										
L4100	A										
L4110	A										
L4130	A										
L4205	A										
L4210	A										
L4350	A										
L4360	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L4370	A										
L4380	A										
L4386	A										
L4392	A										
L4394	A										
L4396	A										
L4398	A										
L5000	A										
L5010	A										
L5020	A										
L5050	A										
L5060	A										
L5100	A										
L5105	A										
L5150	A										
L5160	A										
L5200	A										
L5210	A										
L5220	A										
L5230	A										
L5250	A										
L5270	A										
L5280	A										
L5301	A										
L5311	A										
L5321	A										
L5331	A										
L5341	A										
L5400	A										
L5410	A										
L5420	A										
L5430	A										
L5450	A										
L5460	A										
L5500	A										
L5505	A										
L5510	A										
L5520	A										
L5530	A										
L5535	A										
L5540	A										
L5560	A										
L5570	A										
L5580	A										
L5585	A										
L5590	A										
L5595	A										
L5600	A										
L5610	A										
L5611	A										
L5613	A										
L5614	A										
L5616	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L5617	A										
L5618	A										
L5620	A										
L5622	A										
L5624	A										
L5626	A										
L5628	A										
L5629	A										
L5630	A										
L5631	A										
L5632	A										
L5634	A										
L5636	A										
L5637	A										
L5638	A										
L5639	A										
L5640	A										
L5642	A										
L5643	A										
L5644	A										
L5645	A										
L5646	A										
L5647	A										
L5648	A										
L5649	A										
L5650	A										
L5651	A										
L5652	A										
L5653	A										
L5654	A										
L5655	A										
L5656	A										
L5658	A										
L5661	A										
L5665	A										
L5666	A										
L5668	A										
L5670	A										
L5671	A										
L5672	A										
L5673	A										
L5676	A										
L5677	A										
L5678	A										
L5679	A										
L5680	A										
L5681	A										
L5682	A										
L5683	A										
L5684	A										
L5685	A										
L5686	A										
L5688	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
L5690	A											
L5692	A											
L5694	A											
L5695	A											
L5696	A											
L5697	A											
L5698	A											
L5699	A											
L5700	A											
L5701	A											
L5702	A											
L5703	A											
L5704	A											
L5705	A											
L5706	A											
L5707	A											
L5710	A											
L5711	A											
L5712	A											
L5714	A											
L5716	A											
L5718	A											
L5722	A											
L5724	A											
L5726	A											
L5728	A											
L5780	A											
L5781	A											
L5782	A											
L5785	A											
L5790	A											
L5795	A											
L5810	A											
L5811	A											
L5812	A											
L5814	A											
L5816	A											
L5818	A											
L5822	A											
L5824	A											
L5826	A											
L5828	A											
L5830	A											
L5840	A											
L5845	A											
L5848	A											
L5850	A											
L5855	A											
L5856	A											
L5857	A											
L5858	A											
L5910	A											
L5920	A											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
L5925	A											
L5930	A											
L5940	A											
L5950	A											
L5960	A											
L5962	A											
L5964	A											
L5966	A											
L5968	A											
L5970	A											
L5971	A											
L5972	A											
L5974	A											
L5975	A											
L5976	A											
L5978	A											
L5979	A											
L5980	A											
L5981	A											
L5982	A											
L5984	A											
L5985	A											
L5986	A											
L5987	A											
L5988	A											
L5990	A											
L5993	A											
L5994	A											
L5995	A											
L5999	A											
L6000	A											
L6010	A											
L6020	A											
L6025	A											
L6050	A											
L6055	A											
L6100	A											
L6110	A											
L6120	A											
L6130	A											
L6200	A											
L6205	A											
L6250	A											
L6300	A											
L6310	A											
L6320	A											
L6350	A											
L6360	A											
L6370	A											
L6380	A											
L6382	A											
L6384	A											
L6386	A											



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L6388	A										
L6400	A										
L6450	A										
L6500	A										
L6550	A										
L6570	A										
L6580	A										
L6582	A										
L6584	A										
L6586	A										
L6588	A										
L6590	A										
L6600	A										
L6605	A										
L6610	A										
L6611	A										
L6615	A										
L6616	A										
L6620	A										
L6621	A										
L6623	A										
L6624	A										
L6625	A										
L6628	A										
L6629	A										
L6630	A										
L6632	A										
L6635	A										
L6637	A										
L6638	A										
L6639	A										
L6640	A										
L6641	A										
L6642	A										
L6645	A										
L6646	A										
L6647	A										
L6648	A										
L6650	A										
L6655	A										
L6660	A										
L6665	A										
L6670	A										
L6672	A										
L6675	A										
L6676	A										
L6677	A										
L6680	A										
L6682	A										
L6684	A										
L6686	A										
L6687	A										
L6688	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L6689	A										
L6690	A										
L6691	A										
L6692	A										
L6693	A										
L6694	A										
L6695	A										
L6696	A										
L6697	A										
L6698	A										
L6703	A										
L6704	A										
L6706	A										
L6707	A										
L6708	A										
L6709	A										
L6805	A										
L6810	A										
L6881	A										
L6882	A										
L6883	A										
L6884	A										
L6885	A										
L6890	A										
L6895	A										
L6900	A										
L6905	A										
L6910	A										
L6915	A										
L6920	A										
L6925	A										
L6930	A										
L6935	A										
L6940	A										
L6945	A										
L6950	A										
L6955	A										
L6960	A										
L6965	A										
L6970	A										
L6975	A										
L7007	A										
L7008	A										
L7009	A										
L7040	A										
L7045	A										
L7170	A										
L7180	A										
L7181	A										
L7185	A										
L7186	A										
L7190	A										
L7191	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
L7260	A											
L7261	A											
L7266	A											
L7272	A											
L7274	A											
L7360	A											
L7362	A											
L7364	A											
L7366	A											
L7367	A											
L7368	A											
L7400	A											
L7401	A											
L7402	A											
L7403	A											
L7404	A											
L7405	A											
L7499	A											
L7500	A											
L7510	A											
L7520	A											
L7600	E											
L7611	A											
L7612	A											
L7613	A											
L7614	A											
L7621	A											
L7622	A											
L7900	A											
L8000	A											
L8001	A											
L8002	A											
L8010	A											
L8015	A											
L8020	A											
L8030	A											
L8035	A											
L8039	A											
L8040	A											
L8041	A											
L8042	A											
L8043	A											
L8044	A											
L8045	A											
L8046	A											
L8047	A											
L8048	A											
L8049	A											
L8300	A											
L8310	A											
L8320	A											
L8330	A											
L8400	A											

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L8410	A										
L8415	A										
L8417	A										
L8420	A										
L8430	A										
L8435	A										
L8440	A										
L8460	A										
L8465	A										
L8470	A										
L8480	A										
L8485	A										
L8499	A										
L8500	A										
L8501	A										
L8505	A										
L8507	A										
L8509	A										
L8510	A										
L8511	A										
L8512	A										
L8513	A										
L8514	A										
L8515	A										
L8600	N										
L8603	N										
L8606	N										
L8609	N										
L8610	N										
L8612	N										
L8613	N										
L8614	N										
L8615	A										
L8616	A										
L8617	A										
L8618	A										
L8619	A										
L8621	A										
L8622	A										
L8623	A										
L8624	A										
L8630	N										
L8631	N										
L8641	N										
L8642	N										
L8658	N										
L8659	N										
L8670	N										
L8680	B										
L8681	A										
L8682	N										
L8683	A										
L8684	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
L8685	B										
L8686	B										
L8687	B										
L8688	B										
L8689	A										
L8690	H	1032									
L8691	A										
L8695	A										
L8699	N										
L9900	A										
M0064	Q	0606									
M0075	E										
M0076	E										
M0100	E										
M0300	E										
M0301	E										
P2028	A										
P2029	A										
P2031	E										
P2033	A										
P2038	A										
P3000	A										
P3001	B										
P7001	E										
P9010	K	0950									
P9011	K	0967									
P9012	K	0952									
P9016	K	0954									
P9017	K	9508									
P9019	K	0957									
P9020	K	0958									
P9021	K	0959									
P9022	K	0960									
P9023	K	0949									
P9031	K	1013									
P9032	K	9500									
P9033	K	0968									
P9034	K	9507									
P9035	K	9501									
P9036	K	9502									
P9037	K	1019									
P9038	K	9505									
P9039	K	9504									
P9040	K	0969									
P9041	K	0961									
P9043	K	0956									
P9044	K	1009									
P9045	K	0963									
P9046	K	0964									
P9047	K	0965									
P9048	K	0966									
P9050	K	9506									
P9051	K	1010									

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
P9052	K	1011									
P9053	K	1020									
P9054	K	1016									
P9055	K	1017									
P9056	K	1018									
P9057	K	1021									
P9058	K	1022									
P9059	K	0955									
P9060	K	9503									
P9603	A										
P9604	A										
P9612	A										
P9615	N										
Q0035	X	0100									
Q0081	B										
Q0083	B										
Q0084	B										
Q0085	B										
Q0091	T	0191									
Q0092	N										
Q0111	A										
Q0112	A										
Q0113	A										
Q0114	A										
Q0115	A										
Q0144	E										
Q0163	N										
Q0164	N										
Q0165	B										
Q0166	K	0765									
Q0167	N										
Q0168	B										
Q0169	N										
Q0170	B										
Q0171	N										
Q0172	B										
Q0173	N										
Q0174	N										
Q0175	N										
Q0176	B										
Q0177	N										
Q0178	B										
Q0179	K	0769									
Q0180	K	0763									
Q0181	E										
Q0480	A										
Q0481	A										
Q0482	A										
Q0483	A										
Q0484	A										
Q0485	A										
Q0486	A										
Q0487	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
Q0488	A										
Q0489	A										
Q0490	A										
Q0491	A										
Q0492	A										
Q0493	A										
Q0494	A										
Q0495	A										
Q0496	A										
Q0497	A										
Q0498	A										
Q0499	A										
Q0500	A										
Q0501	A										
Q0502	A										
Q0503	A										
Q0504	A										
Q0505	A										
Q0510	B										
Q0511	B										
Q0512	B										
Q0513	B										
Q0514	B										
Q0515	K	3050									
Q1003	N										
Q1004	E										
Q1005	E										
Q2004	N										
Q2009	K	7028									
Q2017	K	7035									
Q3001	B										
Q3014	A										
Q3025	K	9022									
Q3026	E										
Q3031	N										
Q4001	B										
Q4002	B										
Q4003	B										
Q4004	B										
Q4005	B										
Q4006	B										
Q4007	B										
Q4008	B										
Q4009	B										
Q4010	B										
Q4011	B										
Q4012	B										
Q4013	B										
Q4014	B										
Q4015	B										
Q4016	B										
Q4017	B										
Q4018	B										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS												
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.												
These conversion relationships are effective beginning December 1, 2008.												
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.												
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.												
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .												
HCPCS Code	SI	APC										
Q4019	B											
Q4020	B											
Q4021	B											
Q4022	B											
Q4023	B											
Q4024	B											
Q4025	B											
Q4026	B											
Q4027	B											
Q4028	B											
Q4029	B											
Q4030	B											
Q4031	B											
Q4032	B											
Q4033	B											
Q4034	B											
Q4035	B											
Q4036	B											
Q4037	B											
Q4038	B											
Q4039	B											
Q4040	B											
Q4041	B											
Q4042	B											
Q4043	B											
Q4044	B											
Q4045	B											
Q4046	B											
Q4047	B											
Q4048	B											
Q4049	B											
Q4050	B											
Q4051	B											
Q4079	D											
Q4080	Y											
Q4081	A											
Q4082	B											
Q4083	D											
Q4084	D											
Q4085	D											
Q4086	D											
Q4087	D											
Q4088	D											
Q4089	D											
Q4090	D											
Q4091	D											
Q4092	D											
Q4093	D											
Q4094	D											
Q4095	D											
Q5001	B											
Q5002	B											
Q5003	B											



(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
Q5004	B										
Q5005	B										
Q5006	B										
Q5007	B										
Q5008	B										
Q5009	B										
Q9945	D										
Q9946	D										
Q9947	D										
Q9948	D										
Q9949	D										
Q9950	D										
Q9951	N										
Q9952	D										
Q9953	N										
Q9954	N										
Q9955	N										
Q9956	N										
Q9957	N										
Q9958	N										
Q9959	N										
Q9960	N										
Q9961	N										
Q9962	N										
Q9963	N										
Q9964	N										
Q9965	N										
Q9966	N										
Q9967	N										
R0070	B										
R0075	B										
R0076	B										
V2020	A										
V2025	E										
V2100	A										
V2101	A										
V2102	A										
V2103	A										
V2104	A										
V2105	A										
V2106	A										
V2107	A										
V2108	A										
V2109	A										
V2110	A										
V2111	A										
V2112	A										
V2113	A										
V2114	A										
V2115	A										
V2118	A										
V2121	A										
V2199	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
V2200	A										
V2201	A										
V2202	A										
V2203	A										
V2204	A										
V2205	A										
V2206	A										
V2207	A										
V2208	A										
V2209	A										
V2210	A										
V2211	A										
V2212	A										
V2213	A										
V2214	A										
V2215	A										
V2218	A										
V2219	A										
V2220	A										
V2221	A										
V2299	A										
V2300	A										
V2301	A										
V2302	A										
V2303	A										
V2304	A										
V2305	A										
V2306	A										
V2307	A										
V2308	A										
V2309	A										
V2310	A										
V2311	A										
V2312	A										
V2313	A										
V2314	A										
V2315	A										
V2318	A										
V2319	A										
V2320	A										
V2321	A										
V2399	A										
V2410	A										
V2430	A										
V2499	A										
V2500	A										
V2501	A										
V2502	A										
V2503	A										
V2510	A										
V2511	A										
V2512	A										
V2513	A										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
V2520	A										
V2521	A										
V2522	A										
V2523	A										
V2530	A										
V2531	A										
V2599	A										
V2600	A										
V2610	A										
V2615	A										
V2623	A										
V2624	A										
V2625	A										
V2626	A										
V2627	A										
V2628	A										
V2629	A										
V2630	N										
V2631	N										
V2632	N										
V2700	A										
V2702	E										
V2710	A										
V2715	A										
V2718	A										
V2730	A										
V2744	A										
V2745	A										
V2750	A										
V2755	A										
V2756	E										
V2760	A										
V2761	B										
V2762	A										
V2770	A										
V2780	A										
V2781	B										
V2782	A										
V2783	A										
V2784	A										
V2785	F										
V2786	A										
V2787	E										
V2788	E										
V2790	N										
V2797	A										
V2799	A										
V5008	E										
V5010	E										
V5011	E										
V5014	E										
V5020	E										
V5030	E										

<b>(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS</b>											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
V5040	E										
V5050	E										
V5060	E										
V5070	E										
V5080	E										
V5090	E										
V5095	E										
V5100	E										
V5110	E										
V5120	E										
V5130	E										
V5140	E										
V5150	E										
V5160	E										
V5170	E										
V5180	E										
V5190	E										
V5200	E										
V5210	E										
V5220	E										
V5230	E										
V5240	E										
V5241	E										
V5242	E										
V5243	E										
V5244	E										
V5245	E										
V5246	E										
V5247	E										
V5248	E										
V5249	E										
V5250	E										
V5251	E										
V5252	E										
V5253	E										
V5254	E										
V5255	E										
V5256	E										
V5257	E										
V5258	E										
V5259	E										
V5260	E										
V5261	E										
V5262	E										
V5263	E										
V5264	E										
V5265	E										
V5266	E										
V5267	E										
V5268	E										
V5269	E										
V5270	E										
V5271	E										

(c) The Montana Hospital and ASC Outpatient Fee Schedule Organized by CPT/HCPCS											
Montana has adopted the Ambulatory Payment Classifications (APCs) which are listed in the preceding section (b) for outpatient (Hospital and Ambulatory Surgery Center) reimbursement for workers' compensation services. The far right column in this document lists the respective APC code, when there is one, for the CPT or HCPCS codes listed in the first column of this spreadsheet.											
These conversion relationships are effective beginning December 1, 2008.											
When two or more T status code items are on the same APC claim, the highest weighted code is paid at 100 percent of the Montana APC payment, and subsequent T status code items are paid at 50 percent of the Montana APC payment.											
A Status Indicator (SI) column is included with this fee schedule, to assist in the interpretation of the APC codes. For those unfamiliar with SI codes, a SI table that includes definitions is located at the (g) The Montana Status Indicator (SI) Codes section. Only Montana Status Indicator codes can be used to calculate reimbursements for services and supplies. Ignore status indicator codes other than A, B, D, F, G, H, K, L, N, P, S, T, and X and pay at the fee scheduled amount listed.											
CPT to APC conversion relationships in this fee schedule remain unchanged until the next revision of this fee schedule section referenced in the <u>Administrative Rules of Montana</u> .											
HCPCS Code	SI	APC									
V5272	E										
V5273	E										
V5274	E										
V5275	E										
V5298	E										
V5299	B										
V5336	E										
V5362	E										
V5363	E										
V5364	E										